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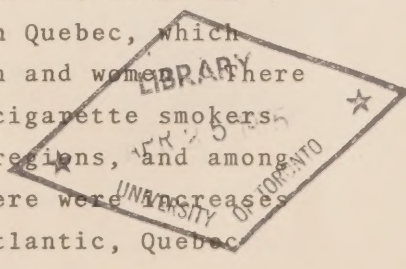
GROWTH IN NON-SMOKING POPULATION

OTTAWA - Statistics on Canadian smoking habits up to December, 1972, reveal a steady increase in the percentage of non-smokers, mainly attributable to the stopping of smoking by adult males and to a lesser extent adult females.

The statistics released today by Health and Welfare Minister Marc Lalonde indicate the overall increase in the proportion of Canadians who do not smoke was achieved despite a sharp increase in smoking by teen-age girls. There was a leveling off of smoking among teen-age boys.

Only two out of five Canadians 15 years of age and over smoke cigarettes regularly. It is estimated that there are almost half a million fewer cigarette smokers in Canada now than there would have been if 1965 rates had continued.

There are considerable variations among regions. The greatest increase in the non-smoking population is found in Ontario and British Columbia and the least in Quebec, which has the heaviest smoking pattern for both men and women. There were decreases in the percentage of regular cigarette smokers 15 years of age and over among males of all regions, and among females in Ontario and British Columbia. There were increases in the percentage of female smokers in the Atlantic, Quebec and Prairie regions.



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The information on smoking habits of Canadians was obtained from Statistics Canada. Tables resulting from Departmental analysis are attached.

Mr. Lalonde said his department is now reviewing smoking and health programs and is developing new directions. He emphasized that while it is necessary to maintain nation-wide efforts to reduce smoking hazards, there is a need to develop more effective services at the community level where they are likely to have most impact. This would require an even greater emphasis on working with other groups.

"To recognize differing local, regional and provincial influences and the excellent resources available throughout the country, we have considerably strengthened our liaison services with provincial governments and other groups dealing with the smoking problem over the past year, and we expect to increase them in the future", said the Minister.

"Since cigarette smoking, like obesity and physical inactivity, is one of those problems where the actions of individuals themselves are a crucial factor, we hope to increasingly involve the persons affected, for example, young people who may be at risk of starting to smoke or older persons wishing to stop. Such groups of smokers, ex-smokers or potential smokers can advise us on the development of programs and also develop programs for themselves, for example in schools, industries and in the community at large."

The Minister commended the increase in local and provincial co-ordinating committees and councils in helping focus attention on the problem, providing continuity of services and avoiding duplication. Membership of these committees and councils includes such groups as the Canadian Home and School and Parent-Teacher Federation, the Canadian Cancer Society, the Canadian Heart Foundation, the Canadian Tuberculosis and Respiratory Disease Association, as well as medical, dental, nursing and hospital associations and departments of education and health.

Footnote

Mr. Lalonde noted that the smoking and health program of his Department is now part of the Non-Medical Use of Drugs Directorate where this problem is being dealt with in perspective with other habit forming or addicting substances. This integration is helping to make available a wider range of resources to deal with cigarette smoking.

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Ref: René Mercier

Tel.: (613) 996-0446

Data for cigarette sales are complex since they reflect the multi-faceted dynamics of smoking and are influenced by the numbers of smokers as well as the amounts smoked by each smoker. Numbers of smokers and amounts smoked by smokers can increase while the proportions of smokers in the population are declining. Therefore, cigarette sales are not a good indication of changes in the proportions of smokers in the population. For this purpose, surveys of smoking habits are required and these reveal that the net increase in cigarette smokers is not keeping pace with population growth.

The normal aging of the smoking population can cause increases in cigarette sales independent of increases in numbers of smokers because smokers tend to smoke more cigarettes as the habit becomes more firmly established.

The above factors plus the fact that the proportion of heavy smokers in the population has remained about the same over the past several years help to account for the finding that the proportion of regular cigarette smokers is declining while total and per capita cigarette sales are increasing.

N.B. Data marked with a D have a high degree of variability and caution should be applied in their use. For the most part all such data should note this.

Footnote

In reviewing the attached tables it should be noted that changes in the earliest age groups, 15-19 and 20-24, reflect the beginning as well as the discontinuation of smoking. Changes in the older age groups mainly reflect discontinuation or resumption of smoking and also the spread of the habit upwards through the age groups by the aging of smokers. This latter effect would be especially expected among women since they have not been smoking as long as men. This can account for increases in the proportion of smokers in the population even if other factors such as the percentage of persons starting to smoke remain the same. It would disappear when the spread of the habit through all age groups had stabilized.

It is felt that smoking among teenagers as well as amounts smoked may be under-reported because the survey is conducted in homes. However, comparability between years is considered reliable.

Data for cigarette sales are complex since they reflect the multi-faceted dynamics of smoking and are influenced by the numbers of smokers as well as the amounts used by each smoker. Numbers of smokers and amounts smoked by each can increase while the proportions of smokers in the population are declining. Therefore, cigarette sales are not a good indication of changes in the proportions of smokers in the population. For this purpose, surveys of smoking habits are required and these reveal that the net increase in cigarette smokers is not keeping pace with population growth.

The normal aging of the smoking population can cause increases in cigarette sales independent of increases in numbers of smokers because smokers tend to smoke more cigarettes as their habit becomes more firmly established.

The above factors plus the fact that the proportion of very heavy smokers in the population has remained about the same over the past several years help to account for the finding that the proportion of regular cigarette smokers is declining while total and per capita cigarette sales are increasing.

N.B. Data marked with a Q have a high sampling variability and caution should be applied in their use. Any further use of such data should make note of this.

Comments on Tables 1a, 1b, 1c, (Non-Smokers).

National

- The proportion of persons who did not smoke at all in 1972 was highest - 88 per cent - among women 65 and over and lowest but still substantial - 37 per cent - among men 25 to 44.
- The 1972 data show the continuation of trends that developed up to 1970. Substantial increases in non-smoking were found among men in all age groups except 15 to 19. The proportion of non-smokers among men 20 and over increased by one third between 1965 and 1972. The proportion of non-smokers appears to have levelled off among males 15 to 19. There was a slight increase in the proportion of non-smokers among women 20 to 24 and 25 to 44.
- The increase in the proportion of non-smokers among men 20 to 64 can be mainly attributed to the discontinuation of cigarette smoking. Most men seem to stop smoking entirely when they discontinue cigarettes. The findings suggest no substantial switch to pipes or cigars since there has been little change in the proportion of pure pipe and/or cigar smokers in the age groups between 20 and 64 and the decrease in regular cigarette smokers has been accompanied by a similar increase in non-smokers.
- The increase in the proportion of non-smokers among men 65 and over is mostly due to the decreased percentage of pipe and cigar smokers in that age group between 1965 and 1972.

Regional

- The continuing and substantial increase in the proportion of non-smoking males 15 and over is found in all regions.
- Among females, the greatest drop in the proportion of non-smokers is found in Quebec, with lesser drops in the Atlantic and Prairie Regions. The proportion of female non-smokers is increasing in Ontario and British Columbia.
- The 1972 data show that there are marked differences among the regions in male smoking habits at specific ages with Quebec having the lowest proportion of non-smokers for all age groups. The widest regional difference in the proportion of non-smokers is in the age group 65 and over where the spread between Quebec (37 per cent) and British Columbia (62 per cent) is 25 per cent. The latter spread is mainly due to differences in cigarette smoking

practices but is partly attributable to the fact that nineteen per cent of Quebec men 65 and over smoke only a pipe and/or cigars compared to fourteen per cent in British Columbia.

- Among women, in 1972, the variation among regions was, on average, less than among men but was considerable in some age groups especially the 15 to 19 year olds. As with men, Quebec has the smallest proportion of non-smokers for all age groups except among women 45 to 64 where the low position is shared with British Columbia.

TABLE 1 a

PERCENTAGE OF NON-SMOKERS* IN THE POPULATION 15 YEARS AND OVER,
BY SEX AND BY AGE GROUP, CANADA, 1965, 1970, 1972

SEX	AGE GROUP	1965	1970	1972	Difference	
					1965-70	1965-72
Both sexes	Total 15 years and over	50.2	52.9	53.6	2.7	3.4
	15 - 19	68.9	65.1	63.0	-3.8	-5.9
	20 - 24	42.6	46.0	47.4	3.4	4.8
	25 - 44	42.1	45.7	47.4	3.6	5.3
	45 - 64	48.1	52.5	52.7	4.4	4.6
	65 years and over	66.8	70.3	71.4	3.5	4.6
	Total 20 years and over	47.2	51.0	52.0	3.8	4.8
Males	Total 15 years and over	34.8	41.1	42.6	6.3	7.8
	15 - 19	60.3	59.1	59.3	-1.2	-1.0
	20 - 24	30.4	38.0	39.4	7.6	9.0
	25 - 44	27.8	34.8	37.0	7.0	9.2
	45 - 64	30.1	38.4	39.4	8.3	9.3
	65 years and over	42.3	49.2	51.5	6.9	9.2
	Total 20 years and over	30.6	38.1	39.8	7.5	9.2
Females	Total 15 years and over	65.3	64.5	64.3	-0.8	-1.0
	15 - 19	77.8	71.3	67.0	-6.5	-10.8
	20 - 24	54.4	54.2	55.5	-0.2	1.1
	25 - 44	56.1	56.6	57.7	0.5	1.6
	45 - 64	66.2	66.1	65.5	-0.1	-0.7
	65 years and over	88.8	87.9	87.8	-0.9	-1.0
	Total 20 years and over	63.4	63.5	63.9	0.1	0.5

* Non-Smoker: Male - does not smoke cigarettes, pipe or cigars.
Female - does not smoke cigarettes.

Source: Percentages based on data collected with the Labour Force Surveys by Statistics Canada.

TABLE 1 b

PERCENTAGE OF NON-SMOKERS* IN THE POPULATION 15 YEARS
OF AGE AND OVER, BY SEX AND BY REGION,
CANADA, 1965, 1970, 1972

Sex	Region	1965	1970	1972	Difference	
					1965-70	1965-72
Both sexes	Canada	50.2	52.9	53.6	2.7	3.4
	Atlantic Region	52.8	53.4	55.0	0.6	2.2
	Quebec	44.5	46.4	46.2	1.9	1.7
	Ontario	51.6	56.1	56.4	4.5	4.8
	Prairie Region	54.4	56.3	57.4	1.9	3.0
	British Columbia	52.5	54.5	56.5	2.0	4.0
Males	Canada	34.8	41.1	42.6	6.3	7.8
	Atlantic Region	36.1	39.7	42.8	3.6	6.7
	Quebec	25.4	31.9	33.1	6.5	7.7
	Ontario	36.9	45.0	45.1	8.1	8.2
	Prairie Region	41.4	46.8	49.2	5.4	7.8
	British Columbia	42.6	45.3	49.1	2.7	6.5
Females	Canada	65.3	64.5	64.3	-0.8	-1.0
	Atlantic Region	69.1	66.9	67.1	-2.2	-2.0
	Quebec	63.1	60.4	58.8	-2.7	-4.3
	Ontario	65.9	66.8	67.4	0.9	1.5
	Prairie Region	67.6	66.0	65.7	-1.6	-1.9
	British Columbia	62.3	63.6	63.9	1.3	1.6

* Non-Smoker: Male - does not smoke cigarettes, pipe or cigars.
Female - does not smoke cigarettes.

Source: Percentages based on data collected with the Labour Force
Surveys by Statistics Canada.

TABLE 1 C

PERCENTAGE OF NON-SMOKERS* IN THE POPULATION
OF CANADA AND REGIONS, BY SEX AND AGE GROUP.
DECEMBER, 1972

Sex	Age Group	Canada	Atlantic Region	Quebec	Ontario	Prairie Region	British Columbia
Males	Total 15 years and over	53.6	55.0	46.2	56.4	57.4	56.5
	15 - 19	63.0	63.4	53.8	68.2	66.0	67.5
	20 - 24	47.4	48.0	41.0	50.2	51.0	50.3
	25 - 44	47.4	48.8	40.4	50.8	49.6	50.1
	45 - 64	52.7	54.3	46.5	54.1	57.7	55.1
	65 years and over	71.4	70.8	63.5	73.9	75.2	75.4
	20 years and over	52.0	53.3	44.9	54.6	56.0	54.9
Females	Total 15 years and over	42.6	42.8	33.1	45.1	49.2	49.1
	15 - 19	59.3	56.7	51.1	63.8	62.9	66.0
	20 - 24	39.4	38.3	32.2	42.1	45.6	42.1
	25 - 44	37.0	38.6	28.2	39.4	42.5	43.5
	45 - 64	39.4	39.3	29.0	41.6	47.0	47.0
	65 years and over	51.5	48.6	36.5	54.9	60.1	61.6
	20 years and over	39.8	39.9	30.0	42.2	46.7	46.5
Males	Total 15 years and over	64.3	67.1	58.8	67.4	65.7	63.9
	15 - 19	67.0	70.4	57.2	72.5	69.0	69.3
	20 - 24	55.5	57.9	50.2	58.3	55.8	58.5
	25 - 44	57.7	59.1	52.1	62.3	56.9	57.0
	45 - 64	65.5	69.3	63.1	66.1	68.1	62.9
	65 years and over	87.8	89.7	85.0	88.3	88.8	87.1
	20 years and over	63.9	66.3	59.1	66.6	65.1	63.2

* Non-Smoker: Male - does not smoke cigarettes, pipe or cigars.
Female - does not smoke cigarettes.

Source: Percentages based on data collected with the Labour Force Surveys by Statistics Canada.

Comments on Tables 2a, 2b, 2c, 2d, 2e, 2f, and 2g (Regular Cigarette Smokers)

- Continuing the downward trend, the proportion of regular cigarette smokers among Canadian men 20 and over dropped on average from 58 per cent in 1965 to 50 per cent in 1972.
- The decrease in smoking among adult males is found as early as the 20 to 24 age group and continues through the 25 to 44 and 45 to 64 age groups. Comparisons between 1966* and 1972 indicate that this decrease is found in all regions but that marked differences remain among regions in the proportions of male regular cigarette smokers. Among men 65 and over, there were decreases in regular cigarette smoking in the Ontario, Prairie and British Columbia Regions with the Atlantic Region remaining about the same and Quebec showing an increase.
- The proportion of regular cigarette smokers among males 15 to 19 appears to have decreased in Quebec between 1966* and 1972 while increasing or levelling off in other regions.
- Sixty per cent of men 20 and over smoked cigarettes regularly in Quebec in 1972 compared to fifty per cent in the Atlantic Region, 46 per cent in Ontario and 44 per cent in the Prairie and British Columbia Regions. Forty-four per cent of boys 15 to 19 smoked cigarettes regularly in Quebec in 1972 compared to 38 per cent in the Atlantic Region, 31 per cent in the Prairie Region, 30 per cent in Ontario and 27 per cent in British Columbia.
- Based on comparisons of 1966* with 1972, regular cigarette smoking appears to have declined to varying degrees among females 20 to 24 and 25 to 44 in all regions except Quebec. British Columbia showed the most change, relinquishing to Quebec its place as the region with the highest proportion of female smokers. The increase in smoking among adult Quebec women is especially noticeable in the 20 to 24 age group where it rose almost five per cent while dropping in all other regions in this age group between 1966* and 1972.
- The differences in the percentages of smokers in the female age groups 20 to 24, 25 to 44 and 45 to 64 indicate that smoking is still spreading up through the age groups of women by aging.
- Thirty-seven per cent of women 20 and over smoked cigarettes regularly in Quebec in 1972 compared to 34 per cent in British Columbia, 32 per cent in the Prairie Region and 31 per cent in the Atlantic and Ontario Regions.

* Data for age groups by regions (tables 2f and 2g) are not available for 1965, hence 1966 is used as the reference year for these comparisons. Although trends are considered reliable, precise differences should be interpreted cautiously.

- There were substantial increases in regular smoking among teenage girls in all regions except British Columbia between 1966* and 1972. The change was most marked in Quebec where the proportion of regular cigarette smokers among females 15 to 19 increased fifteen per cent from 24 to 39 per cent. There was an apparent levelling off in smoking among teenage girls in British Columbia. (Data marked with a Q as with the figures for smoking among teenage girls in British Columbia, in Table 2g, have a high sampling variability and caution should be applied in their use. Any further use of such data should make note of this.)
- The increase in smoking among teenage girls could be partly due: (a) to an increased willingness in 1972 for teenage girls or their mothers to admit their smoking; (b) to women starting to smoke at earlier ages rather than that more of them are destined to become smokers. Regional differences in smoking among teenage girls may also be partly attributable to regional differences in these factors.
- The proportion of regular cigarette smokers among Quebec boys and girls (44 and 39 per cent respectively in 1972) exceeds that among teenagers, boys or girls, in the other regions. A close runner-up to Quebec girls and boys are boys in the Atlantic Region (38 per cent).
- In all age groups but one, for both males and females, Quebec has the highest proportion of regular smokers. For women 45 to 64, British Columbia has the highest percentage of regular smokers.
- The gap is narrowing between the proportions of male and female smokers but in no age group other than the teenage group, does the proportion of female smokers in one region exceed the proportion of male smokers in that or other regions.
- The decrease in regular cigarette smoking among adult men in all age groups and regions is mainly due to a decrease in the percentage of men smoking 11 to 25 cigarettes per day and, to a lesser extent, to a drop in the percentage of men smoking 1 to 10 cigarettes per day. The change in the proportion of men smoking more than 25 cigarettes per day was negligible between 1965 and 1972. This could result from heavier smoking men being less likely to quit as well as from other factors such as increased smoking associated with aging and with affluence. As would be expected,

* Data for age groups by regions (tables 2f and 2g) are not available for 1965, hence 1966 is used as the reference year for these comparisons. Although trends are considered reliable, precise differences should be interpreted cautiously.

with the higher percentage of adult male smokers in Quebec, there are proportionately more very heavy smokers in that region. The Prairie Region has the lowest percentage of very heavy smokers among men.

- There has been a decrease in the percentage of females 15 and over smoking 1 to 10 cigarettes per day with increases in those smoking 11 to 25 and over 25 cigarettes per day.
- In general, proportionately more men than women are very heavy smokers. For example, the proportion of men 15 and over who smoked over 25 cigarettes per day in 1972 ranged from a low of three per cent in the Prairie Region to a high of eight per cent in Quebec. The proportion of women 15 and over smoking over 25 cigarettes per day in 1972 was two per cent in Ontario and the Prairie Region and three per cent in British Columbia and Quebec. The gap narrows somewhat when one compares very heavy smokers as percentages of regular smokers rather than all persons. On this basis, the percentage of male regular cigarette smokers 15 and over, using more than 25 cigarettes per day in 1972, varied from eight per cent in the Prairie Region to fourteen per cent in Quebec. The percentage of female regular cigarette smokers 15 and over, using more than 25 cigarettes per day in 1972 was five per cent in the Ontario and Prairie Regions, seven per cent in Quebec and eight per cent in British Columbia.
- The percentage of heavy smokers tends to increase with age groups among men up to and including the age groups 45 to 64 and among women up to and including the age group 25 to 44.
- Contrary to commonly-held opinion, a minority - only two out of five Canadian adults are habitual cigarette smokers.
- There were an estimated 6,150,000 regular cigarette smokers, 15 years of age and over in Canada in 1972, exclusive of members of the armed forces, persons in institutions and residents of Indian reserves and of the Northwest Territories and Yukon. Because population growth is outstripping the growth in numbers of smokers, it is estimated that there were some 460,000 fewer regular cigarette smokers in the population in 1972 than there would have been if 1965 rates had continued. Mainly because of men quitting smoking, there were some 550,000 fewer regular cigarette smokers among males 15 and over than there would have been if 1965 rates had continued into 1972. The difference between the two figures is almost entirely attributable to the increase in smoking among teenage girls. The decrease or levelling-off of smoking among adult women is also attributed to many of them quitting. Otherwise, an increase would be expected because of more teenage girls smoking and smoking still spreading up through the age groups of women.

TABLE 2a

PERCENTAGE OF REGULAR CIGARETTE SMOKERS IN THE MALE POPULATION
15 YEARS OF AGE AND OVER, ACCORDING TO THE NUMBER OF CIGARETTES
SMOKED PER DAY, BY AGE GROUP, CANADA, 1965, 1970, 1972

Age Group	Number of Cigarettes Smoked Per Day	1965	1970	1972	Difference	
					1965-70	1965-72
Total 15 years and over	1-10	11.7	9.9	9.6	-1.8	-2.1
	11-25	37.2	33.0	32.2	-4.2	-5.0
	over 25	5.8	6.0	5.7	0.2	-0.1
	Total regular smokers	54.6	48.9	47.4	-5.7	-7.2
15-19 years	1-10	16.4	16.3	16.1	-0.1	-0.3
	11-25	17.7	18.6	18.4	0.9	0.7
	Over 25	*	*	*		
	Total regular smokers	35.0	35.7	35.0	0.7	0.0
20-24 years	1-10	12.7	11.2	10.9	-1.5	-1.8
	11-25	45.4	38.6	38.2	-6.8	-7.2
	Over 25	4.0	4.1	3.3	0.1	-0.7
	Total regular smokers	62.1	53.9	52.6	-8.2	-9.5
25-44 years	1-10	9.8	7.4	7.3	-2.4	-2.5
	11-25	45.9	40.2	38.5	-5.7	-7.4
	Over 25	7.5	8.0	7.5	0.5	0.0
	Total regular smokers	63.2	55.5	53.3	-7.7	-9.9
45-64 years	1-10	11.2	9.1	8.5	-2.1	-2.7
	11-25	39.8	34.2	33.4	-5.6	-6.4
	Over 25	7.8	8.1	8.0	0.3	0.2
	Total regular smokers	58.8	51.3	50.0	-7.5	-8.8
65 years and over	1-10	12.2	10.5	9.2	-1.7	-3.0
	11-25	17.8	17.8	18.0	0.0	0.2
	Over 25	2.4	3.0	3.2Q	0.6	0.8
	Total regular smokers	32.3	31.4	30.4	-0.9	-1.9
20 years and over	1-10	10.9	8.8	8.5	-2.1	-2.4
	11-25	40.4	35.5	34.5	-4.9	-5.9
	Over 25	6.6	6.8	6.5	0.2	-0.1
	Total regular smokers	57.9	51.1	49.5	-6.8	-8.4

* Percentage based on population estimates less than 10,000.

Q High sampling variability

Notes: Percentages may not add exactly to the totals due to rounding.
Regular Cigarette Smokers are those who usually smoke cigarettes every day.

Source: Percentages based on data collected with the Labour Force Surveys by Statistics Canada.

TABLE 2b

PERCENTAGE OF REGULAR CIGARETTE SMOKERS IN THE FEMALE POPULATION
15 YEARS OF AGE AND OVER, ACCORDING TO THE NUMBER OF CIGARETTES
SMOKED PER DAY, BY AGE GROUP, CANADA, 1965, 1970, 1972

Age Group	Number of Cigarettes Smoked Per Day	1965	1970	1972	Difference	
					1965-70	1965-72
Total 15 years and over	1-10	11.4	10.1	9.8	-1.3	-1.6
	11-25	18.6	20.5	20.7	1.9	2.1
	over 25	1.3	1.8	1.9	0.5	0.6
	Total regular smokers	31.2	32.4	32.4	1.2	1.2
15-19 years	1-10	10.2	13.2	14.3	3.0	4.1
	11-25	7.9	11.3	13.7	3.4	5.8
	over 25	*	*	*		
	Total regular smokers	18.7	24.9	28.4	6.2	9.7
20-24 years	1-10	15.5	12.0	11.6	-3.5	-3.9
	11-25	24.2	27.5	26.9	3.3	2.7
	over 25	*	2.0	2.0Q		
	Total regular smokers	40.8	41.4	40.6	0.6	-0.2
25-44 years	1-10	13.0	10.5	9.3	-2.5	-3.7
	11-25	25.5	26.8	26.6	1.3	1.1
	over 25	1.9	2.7	3.0	0.8	1.1
	Total regular smokers	40.5	40.0	38.8	-0.5	-1.7
45-64 years	1-10	11.0	9.4	9.5	-1.6	-1.5
	11-25	18.1	20.2	20.1	2.1	2.0
	over 25	1.2	1.9	2.0	0.7	0.8
	Total regular smokers	30.3	31.5	31.6	1.2	1.3
65 years and over	1-10	4.4	4.9	4.6	0.5	0.2
	11-25	4.3	5.4	5.2	1.1	0.9
	over 25	*	*	*		
	Total regular smokers	8.9	10.5	10.4	1.6	1.5
20 years and over	1-10	11.5	9.6	9.0	-1.9	-2.5
	11-25	20.2	22.0	21.7	1.8	1.5
	over 25	1.4	2.0	2.2	0.6	0.8
	Total regular smokers	33.1	33.6	33.0	0.5	-0.1

* Percentages based on population estimates less than 10,000

Q High sampling variability

Notes: Percentages may not add exactly to the totals due to rounding
Regular Cigarette Smokers are those who usually smoke cigarettes every day.

Source: Percentages based on data collected with the Labour Force Surveys by Statistics Canada.

TABLE 2c

PERCENTAGE OF REGULAR CIGARETTE SMOKERS OF BOTH SEXES IN THE TOTAL POPULATION
15 YEARS OF AGE AND OVER, ACCORDING TO THE NUMBER OF CIGARETTES
SMOKED PER DAY, BY AGE GROUP, CANADA, 1965, 1970, 1972

Age Group	Number of Cigarettes Smoked Per Day	1965	1970	1972	Difference	
					1965-70	1965-72
Total 15 years and over	1-10	11.5	10.0	9.7	-1.5	-1.8
	11-25	27.8	26.7	26.3	-1.1	-1.5
	over 25	3.5	3.9	3.8	0.4	0.3
	Total regular smokers	42.8	40.6	39.8	-2.2	-3.0
15-19 years	1-10	13.3	14.7	15.3	1.4	2.0
	11-25	12.9	15.0	16.1	2.1	3.2
	over 25	0.7	0.7	*	0.0	-0.2
	Total regular smokers	27.0	30.5	31.8	3.5	4.8
20-24 years	1-10	14.1	11.6	11.3	-2.5	-2.8
	11-25	34.7	33.1	32.7	-1.6	-2.0
	over 25	2.6	3.0	2.7	0.4	0.1
	Total regular smokers	51.3	47.7	46.7	-3.6	-4.6
25-44 years	1-10	11.4	8.9	8.3	-2.5	-3.1
	11-25	35.6	33.5	32.5	-2.1	-3.1
	over 25	4.7	5.3	5.2	0.6	0.5
	Total regular smokers	51.7	47.7	46.1	-4.0	-5.6
45-64 years	1-10	11.1	9.2	9.0	-1.9	-2.1
	11-25	29.0	27.1	26.7	-1.9	-2.3
	over 25	4.5	4.9	4.9	0.4	0.4
	Total regular smokers	44.6	41.2	40.6	-3.4	-4.0
65 years and over	1-10	8.1	7.4	6.7	-0.7	-1.4
	11-25	10.7	11.1	11.0	0.4	0.3
	over 25	1.3	1.5	1.7	0.2	0.4
	Total regular smokers	20.0	20.1	19.4	0.1	-0.6
20 years and over	1-10	11.2	9.2	8.7	-2.0	-2.5
	11-25	30.2	28.6	28.0	-1.6	-2.2
	over 25	3.9	4.4	4.3	0.5	0.4
	Total regular smokers	45.3	42.2	41.1	-3.1	-4.2

* Percentage based on population estimates less than 10,000.

Notes: Percentages may not add exactly to the totals due to rounding.
Regular Cigarette Smokers are those who usually smoke cigarettes every day.

Source: Percentages based on data collected with the Labour Force Surveys by Statistics Canada.

TABLE 2d

PERCENTAGE OF REGULAR CIGARETTE SMOKERS IN THE MALE POPULATION
15 YEARS OF AGE AND OVER, ACCORDING TO THE NUMBER OF CIGARETTES
SMOKED PER DAY AND BY REGION, CANADA, 1965, 1970, 1972

Region	Number of Cigarettes Smoked Per Day	1965	1970	1972	Difference	
					1965-70	1965-72
Canada	1-10	11.7	9.9	9.6	-1.8	-2.1
	11-25	37.2	33.0	32.2	-4.2	-5.0
	over 25	5.8	6.0	5.7	0.2	-0.1
	Total regular smokers	54.6	48.9	47.4	-5.7	-7.2
Atlantic Region	1-10	12.3	11.0	10.2	-1.3	-2.1
	11-25	36.5	34.0	32.7	-2.5	-3.8
	over 25	4.6	5.7	5.0	1.1	0.4
	Total regular smokers	53.4	50.7	48.0	-2.7	-5.4
Quebec	1-10	13.2	11.7	11.0	-1.5	-2.2
	11-25	43.3	39.2	38.2	-4.1	-5.1
	over 25	7.6	8.1	7.9	0.5	0.3
	Total regular smokers	64.2	59.0	57.1	-5.2	-7.1
Ontario	1-10	11.0	8.8	8.5	-2.2	-2.5
	11-25	35.4	30.2	30.1	-5.2	-5.3
	over 25	5.6	5.3	5.2	-0.3	-0.4
	Total regular smokers	52.0	44.3	43.8	-7.7	-8.2
Prairie Region	1-10	10.7	9.6	9.8	-1.1	-0.9
	11-25	33.9	30.7	28.7	-3.2	-5.2
	over 25	4.0	3.5	3.4	-0.5	-0.6
	Total regular smokers	48.6	43.9	42.0	-4.7	-6.6
British Columbia	1-10	10.4	8.6	8.4	-1.8	-2.0
	11-25	32.3	28.8	27.9	-3.5	-4.4
	over 25	5.0	6.5	5.5	1.5	0.5
	Total regular smokers	47.8	44.0	41.8	-3.8	-6.0

Notes: Percentages may not add exactly to the totals due to rounding.

Regular Cigarette Smokers are those who usually smoke cigarettes every day.

Source: Percentages based on data collected with the Labour Force Surveys by Statistics Canada.

TABLE 2e

PERCENTAGE OF REGULAR CIGARETTE SMOKERS IN THE FEMALE POPULATION
15 YEARS OF AGE AND OVER, ACCORDING TO THE NUMBER OF CIGARETTES
SMOKED PER DAY AND BY REGION, CANADA, 1965, 1970, 1972

Region	Number of Cigarettes Smoked Per Day	1965	1970	1972	Difference	
					1965-70	1965-72
Canada	1-10	11.4	10.1	9.8	-1.3	-1.6
	11-25	18.6	20.5	20.7	1.9	2.1
	over 25	1.3	1.6	1.9	0.5	0.6
	Total regular smokers	31.2	32.4	32.4	1.2	1.2
Atlantic Region	1-10	11.5	10.5	9.7	-1.0	-1.8
	11-25	15.5	18.7	18.8	3.2	3.3
	over 25	*	*	*		
	Total regular smokers	27.9	30.5	29.8	2.6	1.9
Quebec	1-10	12.9	12.1	11.6	-0.8	-1.3
	11-25	18.1	21.6	23.0	3.5	4.9
	over 25	1.2	2.0	2.5	0.8	1.3
	Total regular smokers	32.2	35.8	37.2	3.6	5.0
Ontario	1-10	10.6	9.1	8.8	-1.5	-1.8
	11-25	19.1	19.9	19.3	0.8	0.2
	over 25	1.4	1.7	1.6	0.3	0.2
	Total regular smokers	31.1	30.7	29.6	-0.4	-1.5
Prairie Region	1-10	10.3	9.4	9.0	-0.9	-1.3
	11-25	18.2	20.6	20.4	2.4	2.2
	over 25	0.9	1.2	1.6	0.3	0.7
	Total regular smokers	29.4	31.2	31.0	1.8	1.6
British Columbia	1-10	11.4	8.8	9.3	-2.6	-2.1
	11-25	21.6	21.0	21.2	-0.6	-0.4
	over 25	1.8	3.0	2.8Q	1.2	1.0
	Total regular smokers	34.8	32.8	33.3	-2.0	-1.5

* Percentages based on population estimates less than 10,000

Q High Sampling Variability

Notes: Percentages may not add exactly to the totals due to rounding.
Regular Cigarette Smokers are those who usually smoke cigarettes
every day.

Source: Percentages based on data collected with the Labour Force Surveys
by Statistics Canada.

TABLE 2f

PERCENTAGE OF REGULAR CIGARETTE SMOKERS IN THE MALE POPULATION OF
CANADA BY REGION, BY AGE GROUP, 1966 AND 1972

Age group	Year	Canada	Atlantic Region	Quebec	Ontario	Prairie Region	British Columbia
Total 15 and over	1966	53.6	53.6	63.8	50.3	46.5	48.1
	1972	47.4	48.0	57.1	43.8	42.0	41.8
	Difference	-6.2	-5.6	-6.7	-6.5	-4.5	-6.3
5-19	1966	35.1	34.3	47.7	29.4	27.9	26.6 ^Q
	1972	35.0	37.5	44.0	30.4	31.2	27.4
	Difference	-0.1	+3.2	-3.7	+1.0	+3.3	+0.8
20-24	1966	60.1	59.7	69.1	57.6	49.1	56.5
	1972	52.6	53.9	61.3	47.8	47.5	49.5
	Difference	-7.5	-5.8	-7.8	-9.8	-1.6	-7.0
25-44	1966	61.8	66.0	71.7	57.7	54.5	56.0
	1972	53.3	54.1	62.2	50.4	47.0	47.9
	Difference	-8.5	-11.9	-9.5	-7.3	-7.5	-8.1
45-64	1966	57.8	59.2	67.7	54.6	51.1	52.8
	1972	50.0	52.2	61.4	45.4	44.9	43.3
	Difference	-7.8	-7.0	-6.3	-9.2	-6.2	-9.5
65 years and over	1966	32.3	28.2	37.2	31.9	31.1	30.0 ^Q
	1972	30.4	28.4	39.2	28.2	28.7	23.3 ^Q
	Difference	-1.9	+0.2	+2.0	-3.7	-2.4	-6.7
75 years and over	1966	56.7	57.5	66.7	53.6	49.5	51.0
	1972	49.5	50.2	59.5	46.0	43.8	43.8
	Difference	-7.2	-7.3	-7.2	-7.6	-5.7	-7.2

^Q High Sampling Variability

Note: Regular cigarette smokers are those who smoke cigarettes every day

Source: Percentages based on data collected with the Labour Force Surveys by Statistics Canada.

TABLE 2g

PERCENTAGE OF REGULAR CIGARETTE SMOKERS IN THE FEMALE POPULATION OF
CANADA BY REGION, BY AGE GROUP, 1966 AND 1972

Age Group	Year	Canada	Atlantic Region	Quebec	Ontario	Prairie Region	British Columbia
Total 15 and over	1966	32.1	28.8	33.4	31.5	30.3	36.5
	1972	32.4	29.8	37.2	29.6	31.0	33.3
	Difference	+0.3	+1.0	+3.8	-1.9	+0.7	-3.2
15-19	1966	20.0	17.8	23.7	17.6	18.0	24.4 ^Q
	1972	28.4	25.2	38.6	23.1	25.9	24.8 ^Q
	Difference	+8.4	+7.4	+14.9	+5.5	+7.9	+0.4
20-24	1966	43.4	40.5	41.8	42.9	44.7	50.0
	1972	40.6	38.6	46.3	37.3	39.6	38.3
	Difference	-2.8	-1.9	+4.5	-5.6	-5.1	-11.7
25-44	1966	41.0	41.1	41.2	40.2	40.5	43.8
	1972	38.8	37.7	43.3	34.7	39.6	40.7
	Difference	-2.2	-3.4	+2.1	-5.5	-0.9	-3.1
45-64	1966	31.7	26.7	32.5	32.4	27.6	38.1
	1972	31.6	27.4	32.9	31.6	29.2	35.3
	Difference	-0.1	+0.7	+0.4	-0.8	+1.6	-2.8
65 and over	1966	8.3	*	7.7 ^Q	7.8 ^Q	*	15.3 ^Q
	1972	10.4	*	12.8 ^Q	9.7 ^Q	8.6 ^Q	10.9 ^Q
	Difference	+2.1		+5.1	+1.9		-4.4
50 and over	1966	34.0	31.1	35.1	33.5	32.3	38.4
	1972	33.0	30.6	36.9	30.6	31.7	34.4
	Difference	-1.0	-0.5	+1.8	-2.9	-0.6	-4.0

* Percentage based on population estimates less than 10,000

Q High Sampling Variability

Note: Regular Cigarette Smokers are those who smoke cigarettes every day.

Source: Percentages based on data collected with the Labour Force Surveys by Statistics Canada.

Comments on Table 3 (Occasional Cigarette Smokers)

- The prevalence of occasional cigarette smoking has remained essentially unchanged over the past seven years, about three per cent of persons smoking cigarettes once in a while.
- The proportion of occasional cigarette smokers is greatest - four to five per cent - in the experimenting ages 15 to 19 and 20 - 24 and least among women 65 and over - about two per cent.
- The small percentage of occasional cigarette smokers is a strong indication of the habit forming or addicting properties of cigarette smoking. People generally smoke regularly or not at all.

TABLE 3

PERCENTAGE OF THE POPULATION 15 YEARS OF AGE AND OVER SMOKE CIGARETTES OCCASIONALLY
BY SEX AND BY AGE GROUP, CANADA, 1965, 1970, 1972.

Sex	AGE GROUP	1965	1970	1972	Difference	
					1965-1970	1965-1972
Both sexes	Total 15 years and over	3.4	3.0	3.4	-0.4	0.0
	15 - 19	3.7	3.7	4.7	0.0	1.0
	20 - 24	4.3	4.0	3.9	-0.3	-0.4
	25 - 44	3.1	3.2	3.4	0.1	0.3
	45 - 64	3.3	2.4	2.9	-0.9	-0.4
	65 years and over	3.1	2.0	2.6	-1.1	-0.5
	Total 20 years and over	3.3	2.9	3.2	-0.4	-0.1
Males	Total 15 years and over	3.3	3.0	3.5	-0.3	0.2
	15 - 19	3.9	3.7	4.8	-0.2	0.9
	20 - 24	3.7	3.7	3.9	0.0	0.2
	25 - 44	2.8	2.9	3.2	0.1	0.4
	45 - 64	3.1	2.4	2.9	-0.7	-0.2
	65 years and over	4.0	2.8	3.6 ^Q	-1.2	-0.4
	Total 20 years and over	3.2	2.9	3.2	-0.3	0.0
Females	Total 15 years and over	3.5	3.1	3.3	-0.4	-0.2
	15 - 19	3.6	3.8	4.6	0.2	1.0
	20 - 24	4.8	4.4	3.8	-0.4	-1.0
	25 - 44	3.4	3.4	3.5	0.0	0.1
	45 - 64	3.5	2.3	2.9	-1.2	-0.6
	65 years and over	2.3	1.4	1.9 ^Q	-0.9	-0.4
	Total 20 years and over	3.5	2.9	3.1	-0.6	-0.4

^Q High sampling variability.

Source: Percentages based on data collected with the Labour Force Surveys by Statistics Canada.

Comments on Table 4 (Pipe and Cigar Smokers)

- There has been no marked change in the proportion of men who smoke a pipe and/or cigars but not cigarettes except in the age group 65 and over where 15 per cent of men fell in this category in 1972 compared to 21 per cent in 1965. The latter reduction seems to be due to changing customs and the loss of older pipe and cigar smokers from this age group by death.
- Most men seem to stop smoking entirely when they discontinue cigarettes. The findings suggest no substantial switch to pipes or cigars by men discontinuing cigarettes since there has been little change in the proportion of pipe and cigar smokers in the age groups between 20 and 64 and the decrease in regular cigarette smokers has been accompanied by a similar increase in non-smokers.
- Regionally, Ontario has the greatest proportion of men 20 and over who smoke only pipe and/or cigars (nine per cent) and the Prairie Region the lowest (six per cent). The Atlantic and Quebec Regions have the largest percentage of men 65 and over who smoke only pipe and/or cigars (nineteen per cent) and the Prairie Region the lowest (eight per cent).

N.B. Data marked with a Q have a high sampling variability and caution should be applied in their use. Any further use of such data should make note of this.

TABLE 4

PERCENTAGE OF THE MALE POPULATION 15 YEARS OF AGE AND OVER,
SMOKED ONLY A PIPE AND/OR CIGARS
BY AGE GROUP, CANADA AND REGIONS, 1965, 1970, 1972.

AGE GROUP	1965	1970	1972	Difference	
				1965-1970	1965-1972
Total 15 years and over	7.3	7.0	6.5	-0.3	-0.8
15 - 19	0.8	1.4	*	0.6	0.1
20 - 24	3.8	4.5	4.1	0.7	0.3
25 - 44	6.2	6.8	6.5	0.6	0.3
45 - 64	7.9	7.9	7.8	0.0	-0.1
Total 65 years and over	21.3	16.5	14.6	-4.8	-6.7
Canada	7.3	7.0	6.5	-0.3	-0.8
Atlantic Region	7.1	7.2	5.9	0.1	-1.2
Quebec	7.1	6.0	6.1	-1.1	-1.0
Ontario	8.0	7.9	7.5	-0.1	-0.5
Prairie Region	6.5	6.2	5.2	-0.3	-1.3
British Columbia	6.5	7.6	6.3	1.1	-0.2

PERCENTAGE DISTRIBUTION OF THE MALE POPULATION
WHO SMOKE ONLY PIPE AND/OR CIGARS, BY REGION,
BY AGE GROUP, DECEMBER 1972.

AGE GROUP	Canada	Atlantic Region	Quebec	Ontario	Prairie Region	British Columbia
Total 15 years and over	6.5	5.9	6.1	7.5	5.2	6.3
15 - 19	*	*	*	*	*	*
20 - 24	4.1	*	*	6.0 ^Q	*	*
25 - 44	6.5	4.8 ^Q	6.1	7.1	7.2 ^Q	5.4 ^Q
45 - 64	7.8	6.2 ^Q	6.6 ^Q	10.1	5.4 ^Q	7.4 ^Q
65 and over	14.6	18.9	19.3 ^Q	13.9 ^Q	7.7 ^Q	14.0 ^Q
20 years and over	7.4	6.8	7.1	8.6	6.1	7.1

* Percentages based on population estimates less than 10,000.

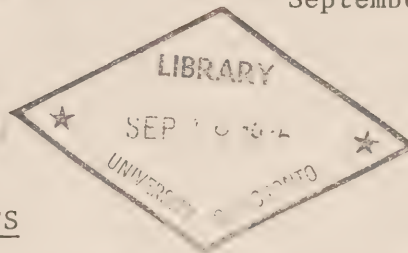
Q High sampling variability.

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news release

1975 - 121

September 10, 1975



HEALTH MINISTER ANNOUNCES SENIOR DEPARTMENTAL APPOINTMENTS

OTTAWA - Health and Welfare Minister Marc Lalonde today announced the appointment by the Public Service Commission of Charles E. Caron, 43, as Assistant Deputy Minister, Medical Services Branch and Mr. Pierre Gravelle, 34, as Assistant Deputy Minister, Health Programs Branch.

Mr. Caron is presently Director-General of Personnel, Department of the Environment. His appointment, succeeding D.B. Dewar as Assistant Deputy Minister, Medical Services Branch, becomes effective September 15.

Mr. Gravelle is currently Assistant Secretary to the Cabinet (Federal-Provincial Relations) and will assume his new responsibilities before the end of September, replacing E.O. Landry who has been Acting Assistant Deputy Minister, Health Programs Branch.

Biographical information for Mr. Caron and Mr. Gravelle is attached.

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Ref.: David Polowin

Tel.: (613) 996-4950



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Charles E. Caron

Born in Sherbrooke, Quebec, Mr. Caron studied at the University of Montreal and the University of Ottawa, where he completed graduate and post graduate studies in philosophy and psychology, and obtained a degree at the Masters level.

He first entered the Public Service as a Junior Executive Officer in 1953 and since that time has occupied a variety of positions in a number of departments. Included in this earlier service was a period of seven years with the Treasury Board Secretariat and an appointment as Director of Superannuation and Group Insurance Programs in the Department of Supply and Services. He was appointed Director-General of Personnel, Department of the Environment, in 1971.

Mr. Caron is married to the former Marthe Taillefer of Ottawa and has four daughters: Danielle, Sylvie, Joanne and Marie-France.

PIERRE GRAVELLE

Mr. Gravelle was born in Ottawa and is a graduate of the University of Ottawa, holding a BA and B.Ph degrees. He also holds a licence in civil law, and was called to the Bar of the Province of Quebec in 1967.

In 1965, Mr. Gravelle was appointed Assistant Secretary of the Board of Central Mortgage and Housing Corporation and two years later joined the National Arts Centre Corporation as Secretary of the Corporation and Legal Counsel.

In 1971, he was appointed to the Federal-Provincial Relations Division of the Privy Council Office. Subsequently he was seconded to the Prime Minister's Office from January 1972 to September 1973 as Assistant to the Principal Secretary to the Prime Minister.

Returning to the Privy Council Office as Assistant Director, Policy and Programme Review Section, Federal-Provincial Relations Division, he was appointed Assistant Secretary to the Cabinet (Federal-Provincial Relations) in January, 1974.

news release

Government
Publications

1975 - 133

October 16, 1975

CANADA PENSION PLAN INVESTMENT FUND REPORT

FOR RELEASE 9.00 a.m. e.s.t

OTTAWA -- Health and Welfare Minister Marc Lalonde today made public a report on: "The Rate of Return on the Investment Fund of the Canada Pension Plan". This report was referred to by the Minister at the "Pensions in Crisis" Conference on September 16 in Toronto.

The report, prepared by the Canada Pension Plan Advisory Committee, a statutory body whose members are private citizens appointed to represent employees, employers, self-employed persons and the public, examines the options for improving the rate of return on CPP investments. It recommends that the Minister of National Health and Welfare open discussions with the provinces as soon as possible concerning the establishment of a new interest rate mechanism.

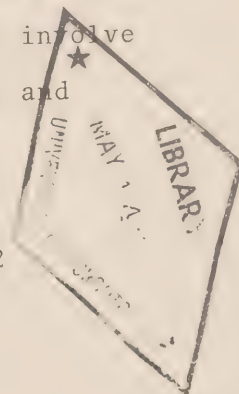
These discussions, the Minister expects, will lead to a broad examination of the Plan's funding objectives and a general review of the Plan's other financial features, and will involve both the Welfare and Finance Departments of the Federal and Provincial Governments.

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The Advisory Committee, in its study, carried out a thorough examination of the current formula for determining interest rates on CPP investments and concludes that the existing mechanism for arriving at the interest rate for the special provincial securities purchased by CPP investment funds has deteriorated over the years.

The Committee explains that the changes that have occurred in financial markets in recent years could not have been predicted when the existing mechanism was chosen, and indeed the existing mechanism itself was not the subject of detailed analysis at the time it was selected.

The report points out that the CPP has gradually become the backbone of provincial financing.

"It is important, given the kinds of pressures now occurring in Canadian capital markets and those likely to occur in the next five years, that the CPP be strongly funded. Such strength obviously cannot come only from a change in the rate mechanism but at least this change in rate should be made".

Moreover, the Report outlines seven possible alternative approaches for improving the rate of return for CPP investment funds and recommends that a new formula be derived along the lines set out in Alternative Six of the Report (use one interest rate for all provinces based on weighted average provincial bond rate) or Alternative Seven of the Report (same as Alternative Six, with an option for each province to pay the rate on its current long term bonds.)

The Advisory Committee believes that as a major factor in Canadian personal savings, it is important that the CPP achieve a fair return on investments and it is important that the investment aspects of the Fund be seen to be fair and suitably productive.

Ref. V. Malarek

Tel. (613) 996-4950

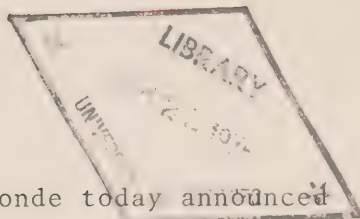
NOTE: Copies of the report will be available to the media by calling the above reference.

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news release

1976 - 23

March 15, 1976



DETAILS ANNOUNCED ON STUDENT EMPLOYMENT

OTTAWA - Health and Welfare Minister Marc Lalonde today announced details on two student employment programs to be undertaken by his department during the summer. As part of the federal government's Student Summer Employment and Activities Program - SSEAP '76 - approximately 510 students will be hired at a cost of \$1,177,000.

Health Activities Summer Employment Program for Students \$660,000

This program will provide jobs for about 300 post-secondary students of health and other disciplines needed in the health field. The project is a program of the Health Programs Branch of the Department of National Health and Welfare administered with the assistance of the Canadian Public Health Association. It offers financial assistance to voluntary health and health-related organizations administering summer projects.

Students should apply to Canada Student Manpower Centres. Voluntary organizations will be required to contact these centres to obtain candidates for projects.

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Voluntary health and health-related organizations may obtain additional information and project application forms from Canadian Public Health Association offices in Halifax; St-Laurent, P.Q.; Ottawa; Saskatoon; Vancouver and Yellowknife.

Support to Community Agencies Program (Non-Medical Use of Drugs)

\$517,000

This program provides support to community groups or organizations involved directly or indirectly with drug, alcohol and tobacco related problems. It will offer summer employment for 210 students through direct services to selected clientele in the community and information gathering on attitudes to and patterns of use of chemical substances.

Depending on the type of project, applications may be made either by students or by community social service agencies which hire student workers.

The program is administered by the regional offices of the Non-Medical Use of Drugs Directorate located in Halifax, Montreal, Toronto, Winnipeg and Vancouver.

Ref.: Carole Peacock

Tel.: (613) 996-4950

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-N26

news release

Government
Publications

1976 - 52

June 3, 1976

\$694,000 FUNDING FOR STUDENT SUMMER EMPLOYMENT

OTTAWA -- Health and Welfare Minister Marc Lalonde today announced the approval of 119 projects to be funded through his department's Health Activities Summer Employment Program for Students (HASEPS) at a total cost of \$694,000.

Under the terms of the program some 320 post-secondary students across Canada will obtain summer employment with the voluntary health and health-related organizations which have received funding. HASEPS is a program of the Health Programs Branch of the Department of National Health and Welfare administered with the assistance of the Canadian Public Health Association.

Since the program was announced on March 15, students have been encouraged to apply to Canada Student Manpower Centres. Voluntary organizations are required to contact these centres in their recruitment of candidates for projects.

- 30 -

Ref. Michael Alexander

Tel. (613) 996-4950



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<u>NAME OF ORGANIZATION</u>	<u>LOCATION</u>	<u>AMOUNT APPROVED</u>
St. John Ambulance	Yellowknife, N.W.T.	\$ 4,625
Kootenay Society for the Handicapped	Fernie, B.C.	4,761
R.E.A.C.H. Centre Assoc.	Vancouver, B.C.	5,060
Health Record Association of British Columbia	Vancouver, B.C.	1,493
Chilliwack Community Services	Chilliwack, B.C.	4,281
Lillooet Hospital Aux.	Lillooet, B.C.	1,697
St. Joseph's General Hospital	Comox, B.C.	3,892
United Way of Greater Vancouver	Vancouver, B.C.	1,705
Misericordia Hospital	Edmonton, Alta	4,281
Blood Donor Recruitment- Edmonton Red Cross	Edmonton, Alta	2,136
C.N.I.B	Calgary, Alberta	5,993
Dr. W.W. Cross Cancer Institution Voluntary Assoc.	Edmonton, Alta	4,281
Canadian Mental Health Association	Calgary, Alta	4,281
Saskatchewan Association for the Mentally Retarded	Saskatoon, Sask	2,141
Family Planning Association of Saskatchewan	Saskatoon, Sask.	6,432
St. Joseph's Hospital Auxiliary	Estevan, Sask.	3,698
Community Health Services Association	Saskatoon, Sask.	4,192
Co-operative Health Centre	Prince Albert, Sask.	1,816
Community Health Services Association	Regina, Sask.	2,141

<u>NAME OF ORGANIZATION</u>	<u>LOCATION</u>	<u>AMOUNT APPROVED</u>
Mental Health Saskatchewan Kindersley Branch	Kindersley, Sask.	\$ 4,281
Arborg Memorial Hospital	Arborg, Man.	2,854
Manitoba Heart Foundation	Winnipeg, Man.	4,281
Manitoba Association for Children with Learning Disabilities	Winnipeg, Man.	4,217
Canadian Red Cross Youth Division	Winnipeg, Man.	4,281
Family Planning	Winnipeg, Man.	4,281
Manitoba Optometric Society	Winnipeg, Man.	6,564
Community Psychiatric Hospital	Guelph, Ont.	4,252
YM-YWCA	Thunder Bay, Ont.	6,422
Canadian Rehabilitation Council for the Disabled	Toronto, Ont.	1,946
Clinique Ste-Anne	Ottawa, Ont.	2,006
Waterloo Regional Health Unit	Kitchener, Ont.	2,141
Ability Centre	Hamilton, Ont.	8,069
Association canadienne pour la santé, l'éducation et la récréation (CAHPER)	Ottawa, Ont.	10,703
War Amputations of Canada	Ottawa, Ont.	2,141
Canadian Health Education Specialists Society	Ottawa, Ont.	6,255
Canadian Tuberculosis & Respiratory Disease Association	Ottawa, Ont.	4,281
Canadian Council on Children & Youth	Toronto, Ont.	3,892
St. John Ambulance	Fort Erie, Ont.	5,708

<u>NAME OF ORGANIZATION</u>	<u>LOCATION</u>	<u>AMOUNT APPROVED</u>
Canadian Hospital Association	Toronto, Ont.	\$ 2,141
Mental Health Metro, CMHA	Toronto, Ont.	2,141
Canadian Hemophilia Society	Guelph, Ont.	2,141
Voice for Hearing Impaired Children	Toronto, Ont.	3,996
The Hospital for Sick Children	Toronto, Ont.	5,878
Baycrest Centre for Geriatric Care	Toronto, Ont.	1,568
Canadian National Institute for the Blind	Ottawa, Ont.	4,042
Canadian College of Health Service Executives	Toronto, Ont.	4,042
Community Legal Aid Services Program	Downsview, Ont.	4,281
St. Matthew's House	Hamilton, Ont.	4,192
Ontario Public Health Association	Toronto, Ont.	4,057
Rape Crisis Centre	Hamilton, Ont.	2,141
Mental Health/Cornwall	Cornwall, Ont.	3,661
Thunder Bay Lung Association	Thunder Bay, Ont.	6,339
Clear Hamilton of Pollution	Hamilton, Ont.	4,281
Association for Children with Learning Disabilities	Ottawa, Ont.	4,281
Child and Family Psychiatric Unit	Kingston, Ont.	3,992
Council on Aging of the Social Planning Council	Ottawa, Ont.	4,082

<u>NAME OF ORGANIZATION</u>	<u>LOCATION</u>	<u>AMOUNT APPROVED</u>
Mental Health Ottawa	Ottawa, Ont.	\$ 4,192
Rockway Gardens Senior Citizens Centre	Kitchener, Ont.	4,267
Waterloo Regional Rape Distress Centre	Waterloo, Ont.	2,141
Ottawa Boys' Club	Ottawa, Ont.	6,468
Port Hope & District Hospital Auxiliary	Port Hope, Ont.	10,703
Canadian Public Health Association	Ottawa, Ont.	6,422
North York General Hospital	Toronto, Ont.	1,996
K-W Planned Parenthood	Kitchener, Ont.	6,867
La Tuque Native Friendship Centre	La Tuque, P.Q.	1,998
Bénévoles de l'Hôtel-Dieu Roberval	Roberval, P.Q.	5,976
C.L.S.C. - St-Henri - Petite Bourgogne	Montréal, P.Q.	10,703
Assoc. au Service de l'enfance Exceptionnelle	Hauterive, P.Q.	9,981
Hôpital Chicoutimi Inc.	Chicoutimi, P.Q.	5,708
C.L.S.C. - Fortierville	Fortierville, P.Q.	9,240
De Salaberry Association for the Mentally Retarded	Chateauguay, P.Q.	6,138
D.S.C. - C.H. Université Laval	Ste-Foy, P.Q.	5,899
Assoc. du Québec pour Enfants avec Problèmes Auditifs (AQEPA)	Montréal, P.Q.	8,017
D.S.C. - C.H. Université Laval	Ste-Foy, P.Q.	6,422

<u>NAME OF ORGANIZATION</u>	<u>LOCATION</u>	<u>AMOUNT APPROVED</u>
Société pour Vaincre la Pollution	Montréal, P.Q.	\$ 3,993
Module d'épanouissement de la vie de Sept-Iles	Sept-Iles, P.Q.	4,709
Fraternité des Malades de Sherbrooke Inc.	Sherbrooke, P.Q.	3,937
Association Mauricienne de Loisirs pour Handicapés	Trois-Rivières, P.Q.	9,138
D.S.C. - Maisonneuve-Rosemont Hospital	Montréal, P.Q.	14,841
YMCA - McGill University	Montréal, P.Q.	10,230
Association Régionale de Loisirs pour Handicapés	Hull, P.Q.	1,998
D.S.C. Hôpital de l'Enfant Jésus	Québec, P.Q.	8,562
Assoc. canadienne de santé mentale du Bas St-Laurent	Ste-Flavie, P.Q.	7,421
Head and Hands, Inc.	Montréal, P.Q.	1,998
Club des Aveugles	Valleyfield, P.Q.	10,703
C.L.S.C. - Chaleurs	Paspébiac, P.Q.	9,730
Good Shepherd Centre	Montreal, P.Q.	5,816
Centre Social de la Croix-Blanche	Québec, P.Q.	4,127
Secours-Amitié	Sherbrooke, P.Q.	6,850
C.L.S.C. - Saguenay Nord	Chicoutimi-Nord, P.Q.	5,566
Multiple Sclerosis Society	Moncton, N.B.	6,421
Carleton Memorial Hospital	Woodstock, N.B.	6,028
New Brunswick Council on Smoking and Health	Fredericton, N.B.	4,280

<u>NAME OF ORGANIZATION</u>	<u>LOCATION</u>	<u>AMOUNT APPROVED</u>
Family Planning Association of Sackville	Sackville, N.B.	\$ 1,128
V.O.N.	Newcastle, N.B.	6,138
Canadian Red Cross	Saint John, N.B.	3,373
Canadian Paraplegic Association	Fredericton, N.B.	2,029
Halifax Youth Clinic	Halifax, N.S.	3,673
Wolfville Women's Centre	Wolfville, N.S.	6,422
Hfx-Dart. Chapter Kidney Foundation	Halifax, N.S.	4,036
Atlantic Child Guidance Centre	Halifax, N.S.	2,854
Community Conscious-Minded Women	Petit de Grat, N.S.	7,524
Association for Mentally Retarded, N.S. Division	Halifax, N.S.	6,849
Digby-Annapolis Mental Health Centre	Digby, N.S.	14,042
Consumers Association of Canada	Halifax, N.S.	3,673
Canadian Cancer Society	Charlottetown, P.E.I.	2,141
P.E.I. Council of the Disabled	Charlottetown, P.E.I.	4,281
ACT Committee of Newman	Charlottetown, P.E.I.	9,730
P.E.I. Recreation and Sports Association for the Disabled	Charlottetown, P.E.I.	6,373
Nfld. Tuberculosis & Respiratory Disease Association	St. John's Nfld (St. Pauls, St. Barbe South)	4,541

<u>NAME OF ORGANIZATION</u>	<u>LOCATION</u>	<u>AMOUNT APPROVED</u>
Canadian Red Cross Society Newfoundland Branch	St. John's Nfld. (Flowers Cove, Roddicton & Belleoram)	\$ 4,281
Corner Brook Safety Council	Corner Brook, Nfld.	6,422
Grand Bank-Fortune Safety Council	Fortune, Burin Peninsula, Nfld.	7,991
Western Memorial Regional Hospital	Corner Brook, Nfld.	6,378
City of Vancouver Health Department	Vancouver, B.C.	6,422
City of Edmonton Local Board of Health	Edmonton, Alta	4,092
Service de Recreation	Shawinigan, P.Q.	6,422
Canadian Mental Health Association - Newfoundland Division	St. John's Nfld.	6,422
N.W.T. Branch - Canadian Public Health Assoc.	Yellowknife, N.W.T	10,630

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July 26, 1976

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WELFARE FELLOWSHIPS AWARDED

OTTAWA -- Health and Welfare Minister Marc Lalonde today announced the awarding of National Welfare Fellowships to 24 Canadian residents. The fellowships, granted through the National Welfare Grants program of the Department of National Health and Welfare, are intended to help develop and increase personnel resources in teaching, research, policy planning and administration in the Canadian social welfare field.

A list of the successful candidates follows. The university where each will study is indicated in brackets following their home town.

BRITISH COLUMBIA

Brigitte Kitchen, Vancouver (London School of Economics)

ALBERTA

Kenneth Gordon, Edmonton (Edinburgh)

Wesley Shera, Calgary (Pennsylvania State)

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SASKATCHEWAN

James Armstrong, Regina (Edinburgh)

Djuwe Blom, Yorkton (Minnesota)

Donald Fuchs, Regina (Toronto)

MANITOBA

Frank Johnston, Virden (Washington State)

Stanley Remple, Morris (Pennsylvania State)

ONTARIO

Howard Burton, Woodstock (Pittsburgh)

Luke Fusco, Kitchener (Toronto)

Susan Watt, Toronto (UCLA)

Rosemary Cassano, Toronto (Toronto)

QUEBEC

Céline Bedard, Québec (Columbia)

Jean-Louis Gendron, Sherbrooke (Laval)

Frédéric Lesemann, Montreal (Ecole Pratique des Hautes Etudes)

Justin Levesque, Rivière-du-Loup, (United States International)

Steven Levy, Montreal (Toronto)

Claude Nelisse, Sherbrooke (Aix-en-Provence)

Irene Ouellette, Cookshire (Columbia)

Elaine Belanger, Québec (Toronto)

Miles Buckman, Montreal (Wisconsin)

QUEBEC (continued)

Barbara Heppner, Montreal (McGill)

NEW BRUNSWICK

John Lutes, Moncton (Toronto)

PRINCE EDWARD ISLAND

Roger Delaney, Charlottetown (Toronto)

Ref. John Olson

Tel. (613) 996-4950



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news release

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1976 - 80

August 3, 1976

POSSIBLE ERRORS ARISING FROM PREGNANCY TESTS ON THE CANADIAN MARKET

OTTAWA - Health and Welfare Minister Marc Lalonde today announced that the Health Protection Branch of his Department has issued an Information Letter to Canadian physicians, pharmacists, hospitals and clinical laboratories, advising them of possible errors due to interference of urinary protein in a number of pregnancy tests on the Canadian market.

The interference is caused by a condition known as "proteinuria". Studies conducted in the Branch's laboratories have shown that some results of pregnancy tests carried out on non-pregnant patients with proteinuria were found to be positive, as described in the attached table. The commercial test kits used in these studies were purchased between July 1975 and March 1976. It should be noted that the table indicates only the probabilities of false positives.

Manufacturers whose products were tested have been asked to label their kits to indicate the exact extent of protein interference to be expected. In the meantime, physicians, pharmacists, hospitals and clinical laboratories are advised to take into account the possibility of protein interference in pregnancy tests.

- 30 -

Ref.: René Mercier

Tel.: (613) 996-0446



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PERCENTAGE OF FALSE POSITIVES IN NON-PREGNANT PATIENTS WITH PROTEINURIA

Brand Name of Kit	Manufacturer or Distributor	Protein Concentration (mg/100 ml)			
		10 - 50	51 - 155	156 - 300	301 - 900
Percentage of False Positives					
Brevindex	Ortho Diagnostics Don Mills, Ontario	0	22	23	100
Pregna-Chek	Hyland Malton, Ontario	0	17	46	57
Prepuerin	Warner-Chilcott (Distributor) Scarborough, Ontario	0	11	31	50
Pregnosticon Dri-Dot	Organon Canada Limited West Hill, Ontario	0	17	15	50
Prepurex	Warner-Chilcott (Distributor) Scarborough, Ontario	0	17	15	50
UCG Tube Test	Denver Laboratories (Canada) Limited Toronto, Ontario	0	6	23	29
UCG Slide Test	Denver Laboratories (Canada) Limited Toronto, Ontario	0	6	15	21
Denco Preg Test	Denver Laboratories (Canada) Limited Toronto, Ontario	0	6	15	7
Confidelle	Denver Laboratories (Canada) Limited Toronto, Ontario	0	6	15	7
Pregnosticon All-in	Organon Canada Limited West Hill, Ontario	0	6	8	7
Pregnosis	Hoffman-LaRoche Limited Vaudreuil, Quebec	0	0	0	7

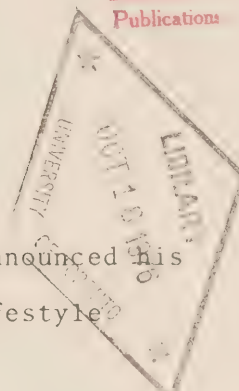
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October 4, 1976

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CANADIANS TO CHECK HEALTH HABITS

OTTAWA - Health and Welfare Minister Marc Lalonde today announced his department's plans to distribute a self-scoring health lifestyle appraisal with October Family Allowances cheques.

"Your Lifestyle Profile" will enable individuals to determine for themselves the quality of their lifestyle and to see where improvement is needed. Approximately 3.6 million Canadians receive the cheques each month but it is hoped that more than this number will assess their health habits as others in the family become interested. For persons who are not cheque recipients, copies of the questionnaire are available from the Information Directorate, Department of National Health and Welfare, Ottawa.

In November, a follow-up message called "Ways to Improve Your Lifestyle Profile" will offer recipients general advice on how to resolve their lifestyle problems.

"Your Lifestyle Profile" and "Ways to Improve Your Lifestyle Profile" are elements of Operation Lifestyle, a public education program developed by the department to encourage Canadians to assume

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greater responsibility for their own health. Earlier this year Mr. Lalonde introduced the Fit-Kit to help individuals estimate their levels of physical fitness and assist them in selecting activities appropriate to age, lifestyle and personal capacity. Later this month, Dialogue on Drinking, a national information program aimed at reducing the excessive use of alcohol, will be introduced. Other components of Operation Lifestyle will be announced later this year.

- 30 -

Ref.: Carole Peacock

Tel.: (613) 996-4950

NOTE: Lifestyle Profile may be reproduced in whole or in part with appropriate credit to the Department of National Health and Welfare.

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November 9, 1976

CONFERENCE ON HANDICAPPED PLANNED

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TORONTO - Health and Welfare Minister Marc Lalonde today announced a special one-day seminar on the employability of the handicapped to be held in Toronto on November 26. Cooperating with the department in organizing the seminar are the Canadian Chamber of Commerce, agencies of the Ontario government, Canada Manpower and national voluntary agencies representing handicapped persons. The Chamber of Commerce is inviting its members to participate.

The purpose of the one-day seminar is to inform employers about the abilities of the handicapped and about government programs which provide employers with incentives to hire the handicapped.

Invitations to the seminar will be sent to specially selected members of the Chamber and other employers who have a major responsibility for determining policy with respect to hiring practices.

The seminar follows from a survey done by the Chamber of Commerce last year which showed that the majority of employers are not aware of this overlooked pool of potential employees, who have proven

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Canada

to be top performers at a variety of jobs. The Chamber's survey, conducted in response to a request from the Department of National Health and Welfare, found that respondents who had hired the handicapped rated them equal to, or better than, regular employees. In addition, the survey cited studies which report that handicapped workers' safety records are significantly better than average. The quality of work, attendance and length of stay with the company was the same as regular employees for the majority of the handicapped.

Ref.: Nes Lubinsky

Tel.: (416) 996-5535

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December 3, 1976

FITNESS AND AMATEUR SPORT CONTRIBUTIONS TO CANADIAN UNIVERSITIES

OTTAWA - Eight Canadian universities will receive federal contributions totalling \$1,775,000 to construct new sports facilities or upgrade existing ones.

The contributions, made possible through the Physical Resources Development Program, were announced today by the Honourable Iona Campagnolo, Minister of State for Fitness and Amateur Sport.

While the federal government's role in the construction of these facilities is aimed primarily at sport development, it is also expected that the grants will encourage public participation in recreational activities. A condition of this support is that the facilities be available, as much as possible, to serve the recreational needs of the surrounding communities.

The presence of such facilities, plus an effective public awareness program, should contribute to the Branch's objective of increased public participation in sports and recreation.

Attached is a list of universities receiving contributions.

- 30 -

Ref.: Jean-Paul Charbonneau
Tel.: (613) 996-4950
(613) 996-4510



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<u>Dalhousie University</u> - Halifax, N.S.	\$200,000
International class swimming pool facility within a physical education, recreation and athletic complex.	
<u>University of New Brunswick</u> - Fredericton, N.B.	\$ 75,000
Improvement of facilities for basketball and volleyball at the Aitken University Centre.	
<u>University of Moncton</u> - Moncton, N.B.	\$100,000
Assistance towards a covered stadium and time-keeping equipment within the physical education and sport centre.	
<u>Sherbrooke University</u> - Sherbrooke, Quebec	\$400,000
Assistance towards the construction of new facilities for swimming and diving within a new sport complex.	
<u>University of Toronto</u> - Toronto, Ontario	\$250,000
Assistance towards international class swimming and diving facilities within a comprehensive athletic complex.	
<u>University of Manitoba</u> - Winnipeg, Manitoba	\$250,000
Assistance towards the construction of a winter sports facility at the university.	
<u>Simon Fraser University</u> - Burnaby, B.C.	\$ 65,000
Assistance for the development of a wrestling facility at the university.	
<u>University of British Columbia</u> - Vancouver, B.C.	\$435,000
Assistance towards the construction of an international class aquatic facility at the university.	

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December 10, 1976

CONTRIBUTIONS FOR RESEARCH IN FITNESS,
PHYSICAL RECREATION, AND SPORT

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OTTAWA - The Minister of State for Fitness and Amateur Sport, the Honourable Iona Campagnolo, today announced that \$201,642 is to be awarded to individuals for research and research-related projects in the areas of fitness, physical recreation and amateur sport.

The research will provide information necessary for the effective planning and development of fitness and amateur sport programs in Canada.

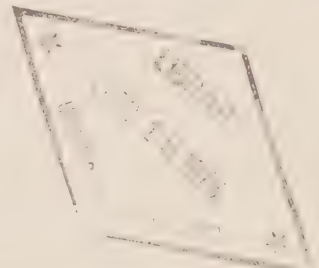
These contributions form part of the Fitness and Amateur Sport Program aimed at improving the fitness level of Canadians, increasing their participation in physical recreation and amateur sport activities and improving the level of sport excellence.

A list of projects is attached.

- 30 -

Ref.: Jean-Paul Charbonneau

Tel.: (613) 996-4510



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<u>TITLE OF PROJECT</u>	<u>INVESTIGATOR</u>	<u>AMOUNT</u>
Aerobic demands of badminton relative to skill level	David Docherty University of Victoria	\$ 1,300
Canadian Synchronized Swimmer Project (CANSYN)	William D. Ross Simon Fraser University	4,800
Exercise management recruitment and retention project	Gordon W. Stewart B.C. Department of Health	5,000
Implementation of a lifestyle modification program and initiation of a functional fitness assessment centre at the University of British Columbia	Edward C. Rhodes University of British Columbia	2,825
Biomechanical analysis of the jumping skills in volleyball	Kenneth D. Coutts University of British Columbia	22,500
Hypothermia: Energy cost of cross-country skiing in mountain areas in relation to clothing, food intake, terrain and physical conditioning	K. E. Cooper University of Calgary	22,090
The effects of physical activity on elderly people	Claudia Emes University of Calgary	3,540
The development of a system of analysis of coach-athlete interaction	Murray F. R. Smith University of Alberta	8,329
The improvement of employee fitness	Lee Coyne University of Calgary	8,700
Physiology of ice hockey performance: Mechanisms and management of fatigue	Howard J. Green University of Waterloo	27,196
Comparison of the acute effects of exercise and/or relaxation on physiological response to stress	Wesley E. Sime University of Waterloo	4,536
Evaluation of swimming performance at the muscle level	Michael E. Houston University of Waterloo	2,218

<u>TITLE OF PROJECT</u>	<u>INVESTIGATOR</u>	<u>AMOUNT</u>
An investigation of the energy costs of cross-country skiing among elite competitors	J. D. MacDougall McMaster University	\$ 3,443
Morphometric measurements of mitochondrial volume and density in human skeletal following heavy resistance training	J. D. MacDougall McMaster University	2,070
Autogenic training techniques for controlling arousal levels	Bonnie B. Bennett University of Western Ontario	4,500
A test of perception as an element of skill in volleyball	F. Allard University of Waterloo	7,500
Synchronized swimming - determination of cardiorespiratory profile of elite performers	N. B. Oldridge McMaster University	7,220
Assessment of the physiological demands of figure skating	John M. Thomson Queen's University	9,440
An investigation of relationship among level of physical fitness, pace of living, selected personality characteristics and stress	Maurice Jetté University of Ottawa	18,750
The upgrading of SIRLS (an information retrieval system for the sociology and social psychology of leisure and sport) to an interactive national information resource	Gerald S. Kenyon University of Waterloo	9,480
Leisure studies data bank: bilingualism project	E. M. Avedon University of Waterloo	20,920
An assessment of the effects of a developmental motor activity program on the self image of aged females	Alex Wright Concordia University	5,285

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January 5, 1977

LIFESTYLE AWARD PROGRAM ANNOUNCED

OTTAWA - Health and Welfare Minister Marc Lalonde today announced details of a program created to acknowledge the contribution made by Canadians in the promotion of positive health lifestyle in their communities.

The Lifestyle Award program is an element of Operation Lifestyle, a public education campaign developed by the department to encourage Canadians to assume greater responsibility for their own health.

In announcing the new program, Mr. Lalonde indicated that while the main purpose of the Lifestyle Award is to bring recognition to individuals who have worked for years, often unrecognized, to raise the level of health awareness in their community, it is hoped that it will also serve to reinforce voluntary action among Canadians.

Deserving persons may be nominated by individuals living in their community, by community organizations, national and provincial associations or municipal governments.

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Nominees should have actively given of their time and energy on a volunteer basis to the improvement of health habits in the community or had significant involvement in the provision of health-related facilities or services. These projects should have been undertaken for a considerable period of time and had a significant impact on members of the community.

Persons selected will receive a medallion featuring the symbol for the Operation Lifestyle campaign and a certificate of recognition.

Nomination forms are available by writing to the Secretary, Lifestyle Award Committee, Ottawa, K1A 0K9.

Ref.: Carole Peacock

Tel.: (613) 996-4950

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January 19, 1977

DETAILS ANNOUNCED ON STUDENT EMPLOYMENT

OTTAWA - Health and Welfare Minister Marc Lalonde today announced details on two student employment programs to be undertaken by his department during the summer. As part of the federal government's Student Summer Employment and Activities Program - SSEAP '77 - approximately 510 students will be hired at a cost of \$1,348,000.

HEALTH ACTIVITIES SUMMER EMPLOYMENT PROGRAM FOR STUDENTS (HASEPS)

The HASEPS Program of the Health Programs Branch will provide funds to assist voluntary health and health-related organizations in hiring students of the health professions and other students who represent resources which are needed by the health field. The main objectives of the Health Activities Summer Employment Program for Students are to:

1. provide students with a positive summer work experience in the health field;
2. assist voluntary health and health-related organizations with the gathering of new knowledge that relates to substantive improvements in the health of Canadians. This would include improvements in lifestyle, environment, human biology and health

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organizations as elaborated in A New Perspective
on the Health of Canadians.

The \$748,000 program will create approximately 300 jobs for post-secondary students for up to 15 weeks work for each student. The program will be administered by the Health Programs Branch through the Canadian Public Health Association.

Voluntary health and health-related organizations should submit applications to the Canadian Public Health Association, 1335 Carling Avenue, Ottawa, Ontario, K1Z 8N8, before March 15, 1977. After applications are approved, voluntary organizations will be required to contact Canada Manpower Centres to obtain candidates for projects. Students should apply through the Canada Manpower Centres.

NON-MEDICAL USE OF DRUGS SUMMER RESOURCES FUND

This program is designed to involve students in the development and testing of more relevant community responses to problems associated with the use of alcohol, tobacco and drugs and to encourage research into specific problems surrounding the use of these substances.

The fund will provide employment for approximately 210 students at a total cost of \$600,000. All projects must be sponsored by an academic institution or social services agency, or by a recognized community group. Applications and awards are normally filed through the sponsor, although students who wish to do research may apply directly, indicating their sponsor(s).

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The program is administered through the regional offices of the Non-Medical Use of Drugs Directorate located in Halifax, Montreal, Toronto, Winnipeg and Vancouver. Applications should be made to these offices by March 15, 1977.

- 30 -

Ref.: Michael Alexander

Tel.: (613) 996-4950

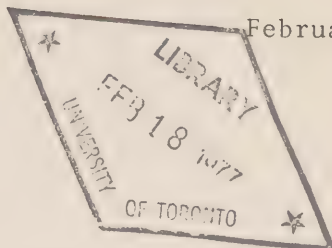
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February 4, 1977



HIGH RISK PERSONS SHOULD RECEIVE BIVALENT INFLUENZA VACCINE

OTTAWA - Health and Welfare Minister Marc Lalonde today made public the latest recommendations of the National Advisory Committee on Immunizing Agents, made at a recent meeting held by the Committee in Ottawa.

These recommendations, which apply to the current influenza season, read as follows:

1. the immunization of high risk groups with bivalent (A/New Jersey and A/Victoria) influenza vaccine be continued;
2. the special bivalent (A/New Jersey and A/Victoria) influenza vaccine formulated for paediatric use be given to high risk children, three or more years of age, as defined in the Committee's recommendations of October 1976. This vaccine, recently licensed in Canada, is a "whole virus" preparation. To achieve adequate protection, two doses should be given four weeks apart.
3. the administration of monovalent (A/New Jersey) influenza vaccine to healthy adults aged 20 to 50 years remain suspended at present;

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Canada

4. epidemiological surveillance of the Guillain-Barré syndrome by health authorities be intensified.

Mr. Lalonde has accepted the Committee's recommendations which have already been transmitted to his provincial counterparts.

Note: A copy of the Committee's statement is attached

Ref.: N.-Rene Mercier

Tel.: (613) 996-0446

THE NATIONAL ADVISORY COMMITTEE ON IMMUNIZING AGENTS

* * * * *

STATEMENT ON THE 1976-77 CANADIAN INFLUENZA
VACCINATION PROGRAM, FEBRUARY 1, 1977

On December 16, 1976, on the advice of members of the National Advisory Committee on Immunizing Agents, the Minister of National Health and Welfare recommended that the immunization of healthy Canadians aged 20 to 50 years with monovalent (A/New Jersey) influenza vaccine be suspended. This decision was made following the announcement of a moratorium on the United States' vaccination program consequent upon a report of an apparent association between influenza vaccination and the development of a neurological disorder, the Guillain-Barré syndrome.

An association between Guillain-Barré syndrome and influenza vaccination has not been confirmed in Canada. It may be difficult to obtain conclusive evidence in this country because of the low incidence of the syndrome in both vaccinated and unvaccinated persons, and the relatively small number of vaccinated persons in Canada.

The Committee believes that the potential benefit of influenza immunization still outweighs the risk of possible complications in persons for whom bivalent influenza vaccine is recommended. In reaching this decision, the Committee recognized present uncertainties and the possibility of limited public acceptance of influenza vaccine this winter.

The Committee recommends that:

1. the immunization of high risk groups with bivalent (A/New Jersey and A/Victoria) influenza vaccine be continued;
2. the special bivalent (A/New Jersey and A/Victoria) influenza vaccine formulated for paediatric use be given to high risk children three or more years of age as defined in paragraph 3.1 of the Committee's recommendations of October 1976. This vaccine, recently licensed in Canada, is a "whole virus" preparation. To achieve adequate protection, two doses should be given four weeks apart;

3. the administration of monovalent (A/New Jersey) influenza vaccine to healthy adults aged 20 to 50 years remain suspended at present;
4. epidemiological surveillance of the Guillain-Barré syndrome by health authorities be intensified.

These recommendations apply to the current influenza season.

FEBRUARY 1, 1977

NATIONAL ADVISORY COMMITTEE ON IMMUNIZING AGENTS

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March 4, 1977

MAJOR INITIATIVES FOR HEALTH AND WELFARE'S FAMILY PLANNING DIVISION ANNOUNCED

OTTAWA - Health and Welfare Minister Marc Lalonde today announced major initiatives to be launched in the family planning and health fields in response to the findings of the Committee on the Operation of the Abortion Law (the Badgley Report).

Heading these initiatives will be a more active role for the Department of National Health and Welfare's Family Planning Division. Speaking at the Conferences of Women, convened by the Secretary of State Department, the Minister said that the policy of the division will be shifted from one of responding to requests to one of active promotion and publicity of family planning information.

The Family Planning Division was established in January, 1972 with the intention of ensuring the accessibility and availability of family planning services to all Canadians who wish to avail themselves of these services.

In addition to a more active role in promoting family planning information, the division will focus its advisory and consultative services on assisting the provinces and voluntary agencies to develop family planning services.

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Other initiatives announced by Mr. Lalonde include:

- . Placing the issue of age of consent relative to counselling and treatment services on the agenda of the next conference of ministers of health and welfare.
- . Assisting provincial officials with the training of personnel.
- . Encouraging provincial ministers to create "approved" hospital services and to provide the necessary staff and supplies in order to offer the needed family planning services.
- . Discussing with the provinces the feasibility of establishing women's clinics affiliated with general hospitals.
- . Making physicians more aware of the terms of the legislation respecting abortion.

Mr. Lalonde said that all of the above steps could be initiated without additional expenditures in terms of man-years or dollars. Some Family Planning Division funds would be redirected from other projects. Moreover, the new Social Services legislation to be introduced in the present session of Parliament will provide for federal cost-sharing with the Provinces of family planning services available without charge.

Ref.: John Olson

Tel.: (613) 996-4950

(STATEMENT ATTACHED)

STATEMENT BY

THE HONOURABLE MARC LALONDE

MINISTER OF NATIONAL HEALTH AND WELFARE

March 4, 1977

I would like to take advantage of the opportunity that you have given me to talk, in particular about the implications for women in Canada of the recent Report of the Committee on the Operation of the Abortion Law, which is better known now, partly because of the media attention that has been accorded to it, as "The Badgley Report".

Amendments to the Criminal Code in 1969 removed, as an offence, the dissemination of information concerning and the sale of devices for the prevention of conception. These changes underlay subsequent amendments to the Food and Drugs Act and the Food and Drug Regulations which permitted advertising to the general public and the sale of contraceptive drugs and contraceptive devices, excepting drugs which would be supplied only on prescription and intrauterine devices which required medical administration.

Amendments to the Criminal Code regarding abortion (1969), made this procedure permissible under certain defined conditions and providing certain specifications were met, specifically if the "continuation of the pregnancy of such female person would or would be likely to endanger her life or health".

The federal government does not consider abortion to be an acceptable method of family planning, as I have stated publicly on several occasions, particularly in the House of Commons on September 11, 1973. It is, however, accepted that abortion counselling, in the sense in which it is ordinarily used, to mean the objective presentation of several alternatives, lies within the laws of Canada as they have been defined by Parliament.

Abortion counselling services should be provided in family planning facilities as long as all the possible options are fairly and clearly presented, and as long as the terms established by the Criminal Code are fully respected. The federal government does support the concept of family planning, and since the Amendments to the Criminal Code in 1969, the

Department of National Health and Welfare has provided support on request for family planning programs in the areas of information, training, research and financial assistance.

The federal Family Planning Division was created in my Department in January, 1972, with the intention of ensuring the accessibility and availability of family planning services to all Canadians who wish to avail themselves of these services. The objectives of the program have centred on four areas of activity, namely:

- (1) informing people about the purpose and methods of family planning so that they could exercise free and individual choice based on factual knowledge,
- (2) promoting training of the health and welfare professional staff who were involved in providing these services,
- (3) promoting relevant research in this area, including population studies, and
- (4) aiding family planning programs operating under public or voluntary auspices, through federal grants-in-aid and joint federal-provincial shared-cost programs.

I propose now to change the policy underlying these joint objectives of information, training, research and financial assistance from a basic "response to request", to a policy of active promotion and publicity of family planning information.

It is also my intention, in consideration of the findings in the Badgley Report, to place the issue of "age of consent" relative to counselling and treatment services, on the agenda of the next Conference of Ministers of Health and Welfare. This would allow the Ministers to consider this question and invite further discussion and consideration with their jurisdictional authorities.

The availability of family planning services will also be considered in light of the proposed Social Services Legislation, wherein provisions have been made for the universality of availability of such services. We want to highlight the federal government perspective and also to stress prevention and our expressed desire to improve lifestyles to a significant extent. The expertise and experience gained from similar programs in other areas will be made available for the promotion of family planning.

The issue will also be raised of assisting the provinces, through previously arranged funding mechanisms for health services, in order to increase the availability of family planning services. Officials of my Department will be advised to develop and prepare inserts for the Family Allowance cheques in which it will be pointed out that responsible parenthood involves consideration of the use of family planning methods. These steps will serve to reduce the incidence of unwanted children and thereby materially reduce the problems of child neglect, abandonment, desertion, dependency and abuse.

Educational channels, national television networks and other media sources will be approached by officials in the Information Directorate to determine effective ways of informing the public at large. Because active promotion will, we expect, result in a marked increase in the number of requests for these services, I will attempt to obtain the agreement of the provincial Health and Welfare Ministers that they will endeavour to respond to increased demands.

The provincial Ministers will be advised that the Family Planning Division is preparing a curriculum content guide in family planning and family life education. We hope that provincial officials involved in family planning will appraise the document and forward it to departments of education as a resource tool for broad dissemination.

There is an urgent need for appropriate training of personnel in this area and the consultants of the Family Planning Division will assist provincial ministry officials in developing training sessions and related activities.

It is my intention to point out to the provincial Ministers that, under the terms of the 1958 Hospital Insurance and Diagnostic Services Act and the 1968 Medical Care Act, services designated as comprehensive and universal, and required by the public, should be honoured. If there is sufficient demand, the provincial Ministers have authority to declare a hospital "approved" for this type of service. I will encourage the Ministers to create "approved" hospital services and to provide the necessary staff and supplies, in order to offer the needed family planning services.

Without going to the expense of constructing new buildings, a number of existing structures could possibly be used in considering centralizing services that are provided especially for women. We will discuss with the provinces the feasibility of establishing women's clinics that are affiliated directly with a general hospital, to provide family planning, fertility counselling, cancer screening, abortions, general maternal health, breast self-examination instruction, and related community services, including counselling in parenting and family life. The day clinic component could also provide the necessary range of counselling services as an extension of community services. These services would later be studied for inclusion under cost-shared programs.

Because of financial restraints at the present time, and by involving present provincial officials as resource persons in family planning, all of the steps which I have outlined for you could be initiated without additional expenditures in terms of man-years or dollars.

In the current fiscal year, 1977-78, I am prepared to allocate funds from the operating budget of my Department toward a series of departmentally sponsored seminars involving provincial Departments of Health, Social Services and Attorneys General, as well as medical, legal, social services and community organizations. Family Planning Division funds for this fiscal year previously earmarked for another project have been redirected for the purpose of increasing advisory and consultative services. We also hope to increase, on an interim basis, project funds for direct service going to the local and provincial affiliates of national voluntary agencies, with a portion of these funds being devoted to training of personnel.

I propose to have officials work through the Canadian Medical Association in order to make physicians, both specialists and general practitioners, more aware of the terms of the Legislation respecting abortion, as well as to focus on the preventive aspects of family planning. The concerned officials have been requested to meet in order to arrive at effective means for increasing the relevance of data collection related to family planning and to abortion. An individual case-reporting system (abortion) was proposed and adopted by the provinces in 1972. All ten provinces are now participating in this system so that it is merely a matter of adding to this already existing system.

In keeping with the fundamental objective that every child should be a wanted child, the Family Planning Program will devote attention both to conception and contraception, so that Canadian couples may freely choose to have a child when they want one.

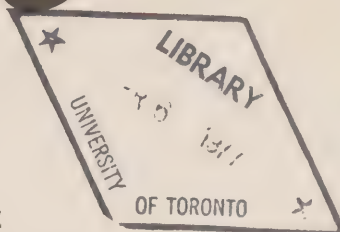
Thank you.

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news release

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March 24, 1977



REVISED CANADA'S FOOD GUIDE

OTTAWA - Health and Welfare Minister Marc Lalonde today made public the revised Canada's Food Guide. The purpose of Canada's Food Guide is to provide a common basis for nutrition education. It is a flexible tool which can be adapted to the needs and circumstances of all Canadians.

The new Food Guide was developed by the Federal/Provincial Committee on Nutrition, an advisory committee to the Department of National Health and Welfare. It evolved from earlier versions through evaluation of food consumption patterns found in the Nutrition Canada Survey. Comments on the revision were obtained from dietitians, home economists, physicians, and nutritionists, both through professional associations and directly from individuals.

One change in the revised Guide is the amalgamation of the fruit group and the vegetable group. This change does not minimize the importance of vegetables nor encourage the substitution of fruits for vegetables. The Guide specifies at

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least two servings of vegetables each day out of four or five servings recommended in the fruit and vegetable category.

Other recommendations include milk and milk products according to age, two servings of meat and alternates per day and three to five servings of bread and cereals.

A handbook on the use of the Guide has been prepared and will be available later in the spring. Designed primarily for teachers and others involved in nutrition education, it includes teaching ideas and covers such subjects as snacking, use of supplements and the special requirements of certain individuals.

Copies of the new Canada's Food Guide are available free of charge to the general public from local health units and provincial health departments. It is hoped that many Canadians will take advantage of the Guide's availability and make an effort to improve their nutrition habits, particularly as the publication of this new Guide coincides with National Health Week, April 3-9, sponsored by the Health League of Canada.

- 30 -

Ref.: Ysabelle Le Sieur

Tel.: (613) 996-7170

NOTE: The enclosed Canada's Food Guide may be reproduced in whole or in part with appropriate credit to the Department of National Health and Welfare.

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news release

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June 9, 1977

\$926,000 FUNDING FOR STUDENT SUMMER EMPLOYMENT

OTTAWA - Health and Welfare Minister Marc Lalonde today announced the approval of 194 projects to be funded through his department's Health Activities Summer Employment Program for Students (HASEPS) at a total cost of \$926,000.

Under the terms of the program 480 post-secondary students across Canada will obtain summer employment with the voluntary health and health-related organizations which have received funding. HASEPS is a program of the Health Programs Branch of the Department of National Health and Welfare administered with the assistance of the Canadian Public Health Association.

A total of 413 project applications were received from across Canada of which 47% were funded. The allocation of funds was based on population and regional student unemployment figures. Many worthwhile projects could not be funded due to the limitation of available funds.

A list of the projects to be funded is attached.

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Ref.: Michael Alexander

Tel.: (613) 996-4950



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<u>NAME OF ORGANIZATION</u>	<u>LOCATION</u>	<u>AMOUNT APPROVED</u>
N.W.T. Council of St. John	Yellowknife, N.W.T.	\$ 5,786
Canadian Public Health Association	Yellowknife, N.W.T.	14,697
Consumers' Association of Canada	Yellowknife, N.W.T.	4,450
N.W.T. Status of Women Action Centre	Yellowknife, N.W.T.	2,271
Women's Resources Centre	Vancouver, B.C.	8,592
McLeod Lake Band	McLeod Lake, B.C.	8,842
Osborne Guest Home	Terrace, B.C.	4,396
Skeenaview Society	Terrace, B.C.	9,643
Surrey Coordinating Centre	Surrey, B.C.	4,446
Action B.C.	Vancouver, B.C.	8,842
R.E.A.C.H. Centre Association	Vancouver, B.C.	2,246
Shuswap Lake General Hospital	Salmon Arm, B.C.	1,635
St. John Council for British Columbia	Vancouver, B.C.	6,744
Women's Auxiliary to the Campbell River & District General Hospital	Campbell River, B.C.	581
Multiple Sclerosis Society of Canada	Vancouver, B.C.	2,225
Planned Parenthood Association of B.C.	Port Alberni, B.C.	4,990
British Columbia Heart Foundation	Vancouver, B.C.	4,406
G.F. Strong Rehabilitation Centre	Vancouver, B.C.	4,442
Matsqui-Sumas-Abbotsford General Hospital	Abbotsford, B.C.	6,318
Good Samaritan Auxiliary Hospital	Edmonton, Alberta	2,059
County of Barrhead Recreation Board	Barrhead, Alberta	2,242
Calgary Birth Control Association	Calgary, Alberta	2,225
Human Parts Bank of Canada	Edmonton, Alberta	4,450
Alberta Children's Hospital	Calgary, Alberta	4,450
Cold Lake/Grand Centre Preventive Social Services	Cold Lake, Alberta	6,738

<u>NAME OF ORGANIZATION</u>	<u>LOCATION</u>	<u>AMOUNT APPROVED</u>
The Canadian Diabetic Association	Edmonton, Alberta	\$ 4,450
Canadian National Institute for the Blind	Edmonton, Alberta	2,028
Preventive Social Services	Bonnyville, Alberta	4,793
Saskatchewan Council for Crippled Children and Adults	Saskatoon, Sask.	4,562
Saskatchewan Association of Metis and Non-Status Indians, Regina Local	Regina, Sask.	8,252
Prince Albert Council on Family Life Education	Prince Albert, Sask.	2,268
Community Health Services Association	Saskatoon, Sask.	8,332
Saskatchewan Co-ordinating Council on Deafness	Regina, Sask.	1,146
TRIAD	Saskatoon, Sask.	1,935
Young Women's Christian Association	Saskatoon, Sask.	2,075
Young Women's Christian Association	Regina, Sask.	3,493
Lafleche Union Hospital	Lafleche, Sask.	1,618
Allergy Foundation of Canada	Saskatoon, Sask.	2,211
Moose Jaw Friendship Centre	Moose Jaw, Sask.	4,006
Minto Family Life Education Centre	Moose Jaw, Sask.	3,561
East-Gate Lodge, Inc.	Beausejour, Man.	4,046
Canadian Cancer Society	Brandon, Man.	4,450
Canadian Paraplegic Association	Winnipeg, Man.	6,619
Sanatorium Board of Manitoba	Winnipeg, Man.	944
Canadian Mental Health Association	Winnipeg, Man.	4,450
Age and Opportunity Centre Inc.	Winnipeg, Man.	4,118
Planned Parenthood Manitoba Inc.	Winnipeg, Man.	1,780
Manitoba Women's Institute	Winnipeg, Man.	2,225
The Manitoba League of the Physically Handicapped	Winnipeg, Man.	4,451
Y.M.C.A. of Winnipeg	Winnipeg, Man.	2,077

<u>NAME OF ORGANIZATION</u>	<u>LOCATION</u>	<u>AMOUNT APPROVED</u>
Canadian Mental Health Association	Toronto, Ontario	\$ 2,225
Huntington Society of Canada	Cambridge (Galt) Ont.	2,217
Glengarry Memorial Hospital Auxiliary	Alexandria, Ontario	4,490
Ontario Lung Association	Willowdale, Ontario	1,771
Ottawa Boys' and Girls' Club	Ottawa, Ontario	2,154
Ontario Hospital Association	Don Mills, Ontario	4,446
Lakehead Psychiatric Hospital	Thunder Bay, Ontario	2,038
Canadian Cystic Fibrosis Foundation	Toronto, Ontario	1,348
Rehabilitation Institute of Ottawa	Ottawa, Ontario	4,446
Canadian National Institute for the Blind	Ottawa, Ontario	6,527
Canadian Nurses Association	Ottawa, Ontario	2,026
Canadian Health Education Society	Ottawa, Ontario	2,225
Canadian Mental Health Association	Peterborough, Ontario	2,225
Toronto General Hospital	Toronto, Ontario	2,023
Pembroke & District Association for the Mentally Retarded	Pembroke, Ontario	4,446
Belleville General Hospital	Belleville, Ontario	3,561
Canadian Diabetic Association	Toronto, Ontario	2,023
Scarborough General Hospital	Scarborough, Ontario	2,225
Oakville - Trafalgar Memorial Hospital	Oakville, Ontario	4,432
Centretown Community Health Centre	Ottawa, Ontario	2,193
Community Committee for the Doctors Hospital	Toronto, Ontario	4,450

<u>NAME OF ORGANIZATION</u>	<u>LOCATION</u>	<u>AMOUNT APPROVED</u>
Community Contacts for the Widowed	Toronto, Ont.	2,073
Canada Safety Council	Ottawa, Ont.	6,444
Cornwall General Hospital	Cornwall, Ont.	4,421
Canadian Hemophilia Society	Hamilton, Ont.	10,385
Wellington-Dufferin-Guelph Health Unit	Fergus, Ont.	2,191
Assumption Health Services Organization	Windsor, Ont.	8,571
Canadian Mental Health Association	Sault Ste. Marie, Ont.	4,226
Ottawa Carleton Lung Association	Ottawa, Ont.	2,223
Community Psychiatric Hospital	Guelph, Ont.	2,230
Thames Valley District Health Council	London, Ont.	8,308
Volunteer Action Centre	Oshawa, Ont.	3,557
Alexandra Park Community Health Centre	Toronto, Ont.	8,632
The Hospital for Sick Children	Toronto, Ont.	1,925
Victorian Order of Nurses	Ottawa, Ont.	1,633
Canadian Rehabilitation Council for the Disabled	Toronto, Ont.	2,077
London District Crippled Children's Treatment Centre	London, Ont.	2,670
North Frontenac Association for the Mentally Retarded	Sharbot Lake, Ont.	2,077
Peterborough Civic Hospital Auxiliary	Peterborough, Ont.	4,446
Crisis Intervention Unit Toronto East General Hospital	Toronto, Ont.	2,023
Baycrest Centre for Geriatric Care	Toronto, Ont.	1,629
Kingston General Hospital	Kingston, Ont.	4,450
Canadian Cancer Society	Toronto, Ont.	4,046
Humber Memorial Hospital	Weston, Ont.	2,223
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Hamilton Psychiatric Hospital Volunteer Association	Hamilton, Ontario	2,210
Mental Health Durham	Oshawa, Ontario	4,154
Mental Health Etobicoke	Etobicoke, Ontario	4,450
Greater Niagara General Hospital	Niagara Falls, Ontario	2,225
Canadian Paraplegic Association	Toronto, Ontario	5,855
Bruce, Dufferin, Grey Lung Assoc.	Owen Sound, Ontario	4,396
Canadian Public Health Assoc.	Ottawa, Ontario	6,676
Association du Québec pour Enfants avec Problèmes Auditifs	Montreal, P.Q.	11,146
Les bénévoles de l'Hôtel-Dieu de Roberval, Quebec	Roberval, P.Q.	6,813
C.L.S.C. du Centre Hospitalier Chandler	Chandler, Comté Gaspé est, P.Q.	10,175
Association des Bénévoles de l'Hôpital de l'Enfant-Jésus	Quebec, P.Q.	4,513
Département de Santé Communautaire Hôpital St-Joseph	Beauceville-ouest, Comté Beauce Nord, P.Q.	6,372
Les Comites Sectoriels du C.L.S.C. de l'Erable de Plessisville	Plessisville, P.Q.	7,963
Groupe d'Action Sociale Inc. de Val-D'Or	Val D'Or, P.Q.	5,469
Association de la Vallée du Richelieu pour les Déficients Mentaux Inc.	Beloeil, P.Q.	10,385
Association Mauricienne des Loisirs pour Handicapés	Trois-Rivières, P.Q.	5,780
C.L.S.C. Lotbinière-Ouest	Fortierville, P.Q.	13,507
Centre de Santé populaire de Rouyn-Noranda	Rouyn, P.Q.	9,026
Clinique Communautaire St-Jean Baptiste	Montreal, P.Q.	8,277
Centre de Relevement et d'Information Sociale	Victoriaville, P.Q.	10,297
Popote roulante du Plateau	Quebec, P.Q.	8,902

<u>NAME OF ORGANIZATION</u>	<u>LOCATION</u>	<u>AMOUNT APPROVED</u>
Pilote "A" Centre	Montreal, P.Q.	\$ 8,901
Centre Local de Services Communautaires Lamater	Terrebonne, P.Q.	4,865
Association pour la Santé publique du Quebec	Montreal, P.Q.	6,676
Département de Santé communautaire Centre Hospitalier de l'Université Laval	Ste Foy, P.Q.	8,314
Centre Local de Services Communautaires Arthur Caux	Laurier Station, Comté Lotbinière, P.Q.	4,760
The Gatineau Memorial Hospital Auxiliary	Wakefield, P.Q.	8,853
Villa Saint-Pascal Inc.	St-Pascal, Kamouraska P.Q.	4,450
Hôpital St-Alexandre	Les Escoumins, Comté Dubuc, P.Q.	4,336
Département de Santé Communautaire Cité de la Santé de Laval	Vimont, Ville de Laval, P.Q.	4,446
Dames Auxiliaires du Centre Hospitalier d'Youville	Sherbrooke, P.Q.	3,857
Centre Local de Services Communautaires Saguenay-Nord	Chicoutimi-nord, P.Q.	9,820
Département de Santé Communautaire du Centre Hospitalier Montreal General	Montreal, P.Q.	8,782
Fondation du Québec de Maladies du Coeur	L'Assomption, P.Q.	8,492
Département de Santé Communautaire de l'Hôpital de l'Enfant-Jésus	Québec, P.Q.	4,778

<u>NAME OF ASSOCIATION</u>	<u>LOCATION</u>	<u>AMOUNT APPROVED</u>
STOP (Society to Overcome Pollution)	Westmount, P.Q.	\$11,115
Centre Local de Services Communautaires de Grande-Vallée	Grande-Vallée Comté Gaspé, P.Q.	5,990
Association des Parents d'Enfants Handicapés Shawinigan-Grand'Mère	Grand'Mère, P.Q.	6,676
Centre Local de Services Communautaires Mont-Joli, Inc.	Mont-Joli, Comté Matapédia, P.Q.	1,918
Département de Santé Communautaire du Centre Hospitalier Maisonneuve- Rosemont	Montreal, P.Q.	6,669
Département de Santé Communautaire de l'Hôtel-Dieu de Lévis	Lévis, Comté Lévis, P.Q.	6,688
Association canadienne pour la Santé mentale	Valleyfield, P.Q.	6,861
La Fraternité des Malades Inc. de Sherbrooke	Sherbrooke, P.Q.	6,206
Association canadienne des Paraplégiques Division du Québec	Montreal, P.Q.	7,390
Département de Santé Communautaire de l'Hôpital régional Baie-Comeau- Hauterive	Hauterive, Comté Saguenay, P.Q.	3,800
Association régionale de Loisirs pour Handicapés de l'Outaouais (ARLHO)	Hull, P.Q.	1,483
Centre Local de Services Communautaires Action Group of the Notre Dame de Grace Action Committee	Montreal, P.Q.	15,261
Canadian Mental Health Association	Saint John, N.B.	4,450
Club Assomption	Grand Falls, N.B.	2,217
Canadian Rehabilitation for the Disabled	Fredericton, N.B.	7,714
Canadian Red Cross Society	Saint John, N.B.	7,714
Hôpital de l'Enfant-Jésus	Caraquet, N.B.	6,267
Moncton Family YMCA	Moncton, N.B.	4,451

<u>NAME OF ASSOCIATION</u>	<u>LOCATION</u>	<u>AMOUNT APPROVED</u>
Canadian Red Cross, N.B. Division Youth Department	Saint John, N.B.	\$ 4,154
Tobique Valley Hospital Auxiliary	Plaster Rock, N.B.	11,127
Canadian Mental Health Association	Fredericton, N.B.	2,210
Canadian Paraplegic Association	Fredericton, N.B.	2,223
Volunteer Bureau	Saint John, N.B.	1,635
Multiple Sclerosis Society of Canada	Moncton, N.B.	5,786
Women's Auxiliary, All Saints Hospital	Springhill, N.S.	10,995
L'Association des Parents Uniques de Clare	Pointe-de-l'Eglise, Comté de Digby Co. N.S.	4,446
Citizens Service League Town House	Glace Bay, N.S.	8,901
Halifax/Dartmouth Chapter of the Kidney Foundation of Nova Scotia	Halifax, N.S.	3,560
Mental Health/Dartmouth	Dartmouth, N.S.	6,669
Nova Scotia Heart Foundation	Halifax, N.S.	4,450
Membertou Ladies Club	Sydney, N.S.	2,937
Halifax Youth Clinic	Halifax, N.S.	4,446
Halifax Rape Relief	Halifax, N.S.	4,421
Health Services Committee of Greater Sackville Community Council, Inc.	Lower Sackville, N.S.	1,473
Red Cross	Guysborough, N.S.	3,996
Canadian Red Cross, N.S. Division	Sydney, N.S.	9,171
Senior Citizens Resource Centre	Sydney, N.S.	8,792
Isaak Walton Killam Hospital for Children	Halifax, N.S.	2,198
Nova Scotia Native Women's Association	Sydney, N.S.	4,451
Prince Edward Island Council of the Disabled	Charlottetown, P.E.I.	4,421
Canadian Cancer Society	Charlottetown, P.E.I.	2,077
Prince Edward Island Association for the Hearing Impaired	Charlottetown, P.E.I.	6,082
Tignish Health Co-op Association	Tignish, P.E.I.	8,355

<u>NAME OF ASSOCIATION</u>	<u>LOCATION</u>	<u>AMOUNT APPROVED</u>
P.E.I. Women's Institute	Charlottetown, P.E.I.	\$ 2,073
Newman Club of University of P.E.I. Student Services	Charlottetown, P.E.I.	11,329
Federation of Newfoundland-Labrador Indians	Baie D'Espoir, Nfld.	4,747
Canadian Public Health Association	St. John's, Nfld.	8,880
Newfoundland Tuberculosis and Respiratory Disease Association	St. John's, Nfld.	5,895
Canadian Red Cross Society	St. John's, Nfld.	2,229
St. John Ambulance Association	St. John's, Nfld.	2,232
St. John's Association for the Mentally Retarded	St. John's, Nfld.	6,676
International Grenfell Association	St. Anthony, Nfld.	4,126
Federation of Newfoundland and Labrador Indians	Glenwood, Nfld.	8,092
Canadian Mental Health Association	St. John's, Nfld.	6,639
Newfoundland Safety Council	St. John's, Nfld.	7,448

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news release

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June 20, 1977

NEW SOCIAL SERVICES BILL INTRODUCED IN HOUSE OF COMMONS

OTTAWA - The social services bill, introduced today in the House of Commons by Health and Welfare Minister Marc Lalonde, aims to help people to help themselves.

The goal of the new legislation is to permit people to become, or to stay, independent -- to encourage individuals to lead more satisfying and independent lives.

The Social Services Act would allow the federal government to share with the provinces in the cost of a wider range of social services than is possible at present. This includes the cost sharing of the provision, development, extension and improvement of social services throughout Canada in order to ensure that adequate services are available. These additional services are required to meet the current needs of society which have changed since the previous legislation was implemented.

The new bill is one of the main achievements of the Social Security Review launched in April, 1973 by Mr. Lalonde, and of the negotiations between the federal and provincial governments which followed.

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Other results of the review include the Community Employment Strategy -- a program of the Department of Manpower and Immigration aimed at utilizing community initiatives and resources and providing work opportunities for the unemployed; the tripling of family allowances; the re-establishment of full portability between the Canada Pension Plan and the Quebec Pension Plan, as well as other significant improvements; the improvement of public assistance programs; and the indexing of benefits under a number of federal programs.

In addition, the Social Security Review saw the emergence of federal proposals for a system of income support and supplementation, which would effect a needed reform of Canada's welfare system and provide new assistance for the working poor. These proposals are currently under consideration by the federal and provincial governments.

The Social Services Act would replace and transcend the current Canada Assistance Plan as well as the Vocational Rehabilitation of Disabled Persons Act.

The additional cost to the federal government under this new program is estimated to be \$132 million in the first year, assuming all provinces and territories participate. For 1977-78, federal government expenditures under the welfare services provisions of the Canada Assistance Plan and the Vocational Rehabilitation of Disabled Persons Act are estimated at \$444 million.

The Social Services Act would allow the federal government to help the provinces respond to changing priorities in the social services field. It will now be able to share in the initiatives being taken in response to the changing needs of vulnerable groups such as the aged, the handicapped and children.

Unlike the Canada Assistance Plan which links social services and the need for social assistance, the social services bill recognizes that persons who need a service are not necessarily on assistance and that the need for social services does not depend upon the level of one's income.

As well, rehabilitation services covered by the proposed act are less restrictive than before. Under the Vocational Rehabilitation of Disabled Persons Act, services have to be aimed at helping handicapped persons obtain vocational skills and/or employment. Now rehabilitation services will also be available to spouses working in the home, children, the elderly, the most severely disabled and those already employed but requiring services to maintain employment.

Again stressing self-reliance, the bill will provide for home support services for the elderly and handicapped, as an alternative to living in institutions. These home support services include homemaker services, meals-on-wheels and day care for adults. For the first time, the federal government will share in the cost of transportation services for the disabled.

Another innovation is the Rehabilitation Fund of \$50 million, which will provide cost sharing in capital expenditures of building or improving training centres (workshops) and making community facilities more accessible to the handicapped.

Under the Social Services Act, cost sharing with the provinces would be available for the following:

- crisis intervention services;
- information and referral services;
- family planning services;
- protective services for children;
- preventive services for children;
- developmental services for children;
- day care services for children;
- rehabilitation services for the disabled;
- social integration services;
- day care services for adults;
- home support services and meal services;
- employment-related services;
- counselling services;
- services to communities;
- transportation for the handicapped.

In extending the scope of cost sharing, the federal government expects persons who have adequate financial resources to pay a user charge for certain services while other services may be available free of charge.

Ref: John Olson

Tel: (613) 996-4950

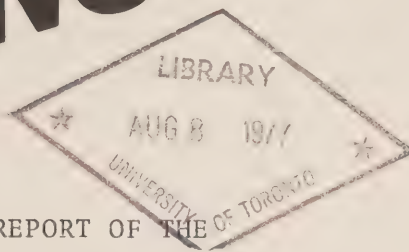
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news release

Government
Publication

1977 - 116

July 27, 1977



PUBLICATION OF THE DENTAL REPORT OF THE NUTRITION CANADA SURVEY

OTTAWA - Emphasis in dental care needs to be placed on fluoridation of water supplies and on nutrition and public education programs, says the Nutrition Canada Dental Report, made public today by Health and Welfare Minister Marc Lalonde.

The major findings of the survey are:

1. Dental caries is the leading cause of tooth loss in persons under 35 years of age. Ninety-six per cent of adults over 19 years of age had dental caries.
2. The percentage of children aged 12-14 years with good teeth, i.e. zero DMF teeth (DMF is the number of decayed, missing and filled permanent teeth) appeared to be unrelated to income.
3. Periodontal disease (a disease of the tissues which support the teeth firmly in the jaws) is the main cause of tooth loss in persons over 30 years of age. About 15 per cent of the adult population had obvious "pockets" of periodontal disease, a condition which was



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generally worse in men than women.

4. Approximately 40 per cent of adults aged 19 years and over had no teeth in one or both dental arches.
5. A consistent beneficial effect of fluoridation in reducing the prevalence of dental caries was observed in children under 11 years of age.
6. Thirty-nine per cent of children aged 12-14 were observed to have a malocclusion (a deviation from the normal, accepted manner in which the teeth of the upper jaw fit with those of the lower jaw). Thirteen per cent showed a serious need for treatment and one per cent an urgent need.

The report concludes that future dental requirements as well as the tremendous backlog of problems can only be met successfully by a combination of sustained prevention and treatment.

NOTE: Copies of the Dental Report are available on request.

Ref.: N-René Mercier

Tel.: (613) 996-0446

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-N 26

news release

1977 - 121

August 8, 1977

CANADIANS TO KNOW MORE ABOUT THEIR BREAKFAST CEREALS

OTTAWA - National Health and Welfare Minister Marc Lalonde and Consumer and Corporate Affairs Minister Tony Abbott today made public a proposal that the labels on breakfast cereals declare the total amount of sugar and other sweeteners, as a percentage of the total weight of each cereal. The proposal is contained in a letter sent to all manufacturers of breakfast cereals by the Health Protection Branch (HPB), Department of National Health and Welfare. The letter also includes proposals for mandatory minimum content of vitamins and minerals that would be required in cereal products.

A survey of the sugar content of Canadian breakfast cereals (attached) was recently completed by HPB. Seventy-four cereals were analyzed and the results indicated that sugar represented up to approximately 56 per cent of the weight of some cereals. Certain foods which are mostly sugar, such as candies and soft drinks, are easily recognized but Canadians may not be aware of the large amount of sugar in some manufactured foods, such as certain breakfast cereals.



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Mr. Lalonde noted that unwise use of sugar is linked to dental caries, a widespread health problem in Canada.

The recently released Nutrition Canada Dental Report has drawn attention to the extent to which caries has affected the dental health of Canadians. Sucrose is of major importance in both the formation of dental plaque and the metabolic activity of oral bacteria which leads to dental caries. Sticky, sweet foods play a particularly undesirable role in this respect.

Many adult Canadians are overweight, their intake of calories being greater than the calories they use. A general reduction in the intake of food and increased physical activity are usually advocated to prevent or treat this problem. When caloric intakes are reduced, those foods which are good sources of nutrients take on increased importance. Foods that are mostly sugar are likely to be low in vitamins, minerals and protein; the intake of such foods should be limited.

NOTE: A list of the sugar content of the 74 breakfast cereals tested is attached.

Ref.: N-René Mercier

Tel.: (613) 996-0446

Sugar Content of 74 Canadian Breakfast Cereals

Per cent of Weight

Cereals

0 - 4.9

Puffed Rice (Quaker)
Oatmeal, Quick Cooking (McNair)
Oatmeal, Quick Cooking (Quaker)
Shredded Wheat, Spoon Size (Nabisco)
Cream of Wheat, Regular (Nabisco)
Puffed Wheat (Newport)
Puffed Wheat Peter Pan (Quaker)
Oatmeal, Instant (Quaker)
Shredded Wheat (Quaker)
Oatmeal, Instant (Robin Hood)
Puffed Wheat (Quaker)
Cream of Wheat, Mix 'n' Eat (Nabisco)
Oatmeal, Instant (Quaker)
Shredded Wheat, Malt Flavoured (Quaker)
Red River Cereal (Maple Leaf)
Shredded Wheat (Nabisco)
Cream of Wheat, Quick (Nabisco)
Oatmeal (Ogilvie)
Grape-Nuts (General Foods)
Cheerios (General Mills)
Wheetabix (Wheetabix)
Wheaties (General Mills)

5.0 - 9.9

Corn Flakes (Kellogg's)
Special K (Kellogg's)
Corn Flakes (General Mills)

Product 19 (Kellogg's)
Bran Flakes (Kellogg's)
Rice Krispies (Kellogg's)

10.0 - 14.9

Grape Nut Flakes (General Foods)
Rice Flakes (Nabisco)
Pep (Kellogg's)
Shreddies (Nabisco)
Raisin Bran (Kellogg's)
All-Bran (Kellogg's)
Granola, Crunchy, with Honey and Almonds
(Sunny Crunch)
4 Grain Team (Nabisco)

15.0 - 19.9

Granola (Canadian Cereal Sales)
Harvest Crunch (Quaker)
Bran Flakes (General Foods)
Mini-Wheats, Brown Sugar (Kellogg's)
Buckwheat and Maple, Whole Wheat (Kellogg's)
Granola, Crunchy, with Fruit and Nuts
(Sunny Crunch)
Mini-Wheats, Frosted (Kellogg's)
Alpen (Wheetabix)
Granola, with Nuts and Raisins (Canadian
Cereal Sales)
100% Bran (Nabisco)
Bran Buds (Kellogg's)
Granola, with Honey and Almonds
(Sunny Crunch)
Harvest Crunch, with Apples and Cinnamon
(Quaker)
Oatmeal, Instant, with Sugar and Spice
(Quaker)

20.0 - 29.9

Oatmeal, Instant, Pre-sweetened (Robin
Hood)
Granola, with Raisins (Sunny Crunch)
Oatmeal, Instant, with Apple and Cinnamon
(Robin Hood)
Oatmeal, Instant, with Apple and Cinnamon
(Quaker)
Oatmeal, Instant, with Maple and Brown
Sugar (Robin Hood)
Oatmeal, Instant, with Maple and Brown
Sugar (Quaker)
Golden Honeys (Nabisco)
Oatmeal, Instant, with Cinnamon and Spice
(Quaker)
Alpha-Bits (General Foods)
Honeycomb (General Foods)
Harvest Crunch, with Raisins and Dates
(Quaker)

30.0 - 39.9

Oatmeal, Instant, with Raisins and Spices
(Quaker)
Sugar Crisp (General Foods)
Trix (General Mills)
Frosted Flakes (Kellogg's)
Captain Crunch (Quaker)
Cocoa Puffs (General Mills)
Lucky Charms (General Mills)
Froot Loops (Kellogg's)

40.0 - 55.7

Boo Berry (General Mills)
Sugar Pops (Kellogg's)
Count Chocula (General Mills)
Apple Jacks (Kellogg's)
Frankenberry (General Mills)

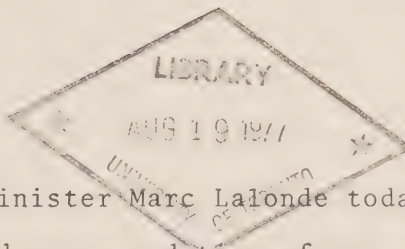
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-N 26

news release

1977 - 123

August 9, 1977

RESTRICTIONS ON SACCHARIN IN DRUG PRODUCTS RECOMMENDED



OTTAWA - Health and Welfare Minister Marc Lalonde today announced that he has received recommendations from an expert committee regarding the use of the artificial sweetener saccharin in drugs and cosmetics.

Members of the expert committee were chosen on the basis of consultation with professional associations of medicine and dentistry. The committee recently met in Ottawa and made the following major recommendations:

- 1) Saccharin has been shown to be carcinogenic in animals and must therefore be presumed to be a potential carcinogen in man. The degree of risk cannot be determined precisely but is considered to be of such a level that where use of saccharin is unavoidable in drugs used to treat serious diseases, its continued use should be allowed.
- 2) Saccharin should be permitted for use as a sweetening agent when used in minimal quantities in 'Prescription-

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only' drugs of significant therapeutic importance. This exemption will only apply where no acceptable alternative formulation exists, and where reformulation has failed to produce a product of sufficient acceptability to ensure the compliance of patients in following the necessary dosage regimen. The only types of drug formulation likely to meet these requirements are those taken in liquid form or as chewable tablets. These are essentially formulations intended for young children who are unable to swallow tablets or capsules. Individual evaluation of each product would be made by the Health Protection Branch.

- 3) Those mouthwashes and toothpastes which are currently considered to be cosmetics under the Food and Drugs Act, should be considered as drugs for the purpose of determining the date of implementation of the restrictions on the use of saccharin.
- 4) The committee also strongly recommends that saccharin or saccharin-containing products should not be taken by pregnant or lactating women.

The Health Protection Branch has taken these recommendations under advisement for the development of regulations governing the use of saccharin in drugs and cosmetics.

NOTE: A list of Committee members and of the associations consulted in its formation is attached.

Ref.: N.-René Mercier

Tel.: (613) 996-0446

MEMBERS OF THE EXPERT COMMITTEE
ON SACCHARIN IN DRUGS AND COSMETICS

- Dr. Richard Bann, University of Ottawa
- Dr. Mimi Belmonte, McGill University
- Dr. J.S. Bennett, Canadian Medical Association
- Dr. John A. Hunt, Lion's Gate Hospital, North Vancouver
- Dr. Claude Marchand, Université de Montréal
- Dr. R.H. Roydhouse, University of British Columbia
- Dr. John Ruedy, McGill University

Have been consulted in the formation of the Committee:

- The Canadian Medical Association;
- The Royal College of Physicians;
- The Canadian Diabetic Association;
- L'Association de médecins de langue française du Canada;
- The College of Family Physicians of Canada;
- The Society of Endocrinology and Metabolism;
- The Canadian Pediatric Society;
- The Canadian Dental Association.

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news release

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August 15, 1977



HEALTH MINISTER ISSUES 1976 STATISTICS ON DRUG USE

OTTAWA - Health and Welfare Minister Marc Lalonde today released a statistical compilation of persons known to have used or been involved with narcotics and other mood-modifying drugs during 1976. The statistics are contained in tables prepared by the Bureau of Dangerous Drugs of the Health Protection Branch.

Mr. Lalonde emphasized that these statistics do not cover all persons in Canada who might have used the drugs concerned, but they do reflect a broad general pattern of usage. Also as there is a trend from single drug use to multiple drug use it becomes more difficult to classify drug users under single drug categories.

The main aspects of these statistics are:

1. Known narcotic drug users

- A total of 1,658 new illicit narcotic drug users were reported to the department in 1976, compared with 2,046 in 1975.
- There was a decrease in new known heroin users to 500

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in 1976 (887 in 1975). Also, new cocaine users decreased to 201 in 1976 (419 in 1975).

2. Known cannabis (marihuana and hashish) users

The department recorded 29,640 new cannabis (marihuana and hashish) users in 1976, compared to 28,767 in 1975.

3. Known users of hallucinogens

In 1976, 1,016 persons became known to the department as new users of hallucinogens, compared to 2,969 in 1975.

4. Convictions recorded under the Narcotic Control Act and Parts III and IV of the Food and Drugs Act

- The decrease in both new heroin and new cocaine users are reflected in the statistics on convictions.
- 33,281 persons were convicted of cannabis offences in 1976 (27,367 in 1975); 31,212 convictions were related to simple possession (25,880 in 1975).
- 1,168 persons were convicted in 1976 for offences associated with hallucinogens (1,903 in 1975), 789 convictions involved L.S.D. (1,570 in 1975) and 250 involved M.D.A. (318 in 1975).

It is not possible, from the available data, to determine whether changes in the number of convictions reflects true changes in the number of drug users, because other factors such as the intensity of police work and court scheduling are also involved.

NOTE: Copies of the statistics are available on request.

Ref.: N.-René Mercier

Tel.: (613) 996-0446

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news release

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August 15, 1977

VALIDITY OF DATA ON THE SAFETY OF NUMEROUS CHEMICALS BEING INVESTIGATED

OTTAWA - Health and Welfare Minister Marc Lalonde today announced that the Health Protection Branch (HBP) of his department has initiated an investigation of toxicity tests conducted by Industrial Biotest Laboratories (IBT), Northbrook, Illinois.

IBT is a commercial testing laboratory that has carried out studies under contract to various chemical manufacturers. Some toxicity tests conducted by IBT have been used by regulatory agencies in several countries to establish the safe use of certain pesticides, food additives, packaging materials and drugs. Agencies such as the World Health Organization have also used some of these data which are recommended to member countries to establish acceptable daily intake levels of various chemicals.

United States agencies have identified problems concerning some IBT data, involving the manner in which animal toxicology studies were conducted. The deficiencies identified to date involve chronic (long-term) toxicity studies, which frequently comprise a major portion of the data utilized internationally for assessment of safety in use.



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Officers of the Branch are working in close cooperation with both the United States Environmental Protection Agency (EPA) and the Food and Drug Administration (FDA) to identify the range of products which are either partially or wholly dependent upon IBT studies for safety data. Due to different regulatory requirements, data submitted in support of petitions for approval of a chemical product in Canada may differ from those submitted in the U.S.A. HBP has assigned staff to examine the extent to which IBT data have been used to support regulatory decisions in Canada. It is anticipated that IBT-generated information on more than 200 chemicals may be scrutinized.

Once the extent of the problem has been defined, the HBP will consider the various actions available, ranging from withdrawal of regulatory approval to maintaining the present status of the specific chemicals. The action will vary for each chemical and will depend largely upon the degree to which IBT data are involved, the type of studies utilized, and the extent to which the chemical is used. Companies whose compounds have been permitted for use will be requested to validate all suspect IBT data using an independent consultant if possible.

Approval of both new chemicals and the extension of the use of approved chemicals for which pertinent safety data have been generated by IBT will be postponed until the Branch is satisfied that the information is reliable.

- 30 -

Ref.: N.-René Mercier
Tel.: (613) 996-0446

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news release

1977 - 139

September 16, 1977

MARC LALONDE PROPOSES NEW FINANCING METHOD FOR FEDERAL SOCIAL SERVICE CONTRIBUTIONS

OTTAWA - Health and Welfare Minister Marc Lalonde today announced that he has proposed a major change in the federal financing of social services.

In letters sent yesterday to provincial Welfare Ministers and to Territorial Commissioners, Mr. Lalonde called for a switch to block financing from the current cost-sharing approach.

Under cost-sharing arrangements, contributions by the federal government are based on a fixed percentage (approximately 50 per cent) of actual program costs. This cost-sharing method forms the present basis of the Social Service legislation introduced in the House of Commons in June 1977.

Mr. Lalonde said that since the introduction of this legislation it has become apparent that a more flexible arrangement is necessary.

Some provinces have proposed more provincial flexibility and autonomy and simpler administrative procedures than is possible under the proposed Social Service legislation.

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"I believe it is important to respond positively to these proposals - especially at this time when new working arrangements are necessary between the federal and provincial governments," the Minister said.

Mr. Lalonde added that since federal contributions to health services are made through block financing, it has become an increasingly more attractive idea to extend the principle to the social services field since the two areas are so closely related.

Under the block-funding proposal, federal government contributions to the provinces for social services would be based on a formula and not on actual expenditures.

If the proposal is accepted by a consensus of the provinces, the federal government would seek to implement the block funding arrangements by April 1, 1978, Mr. Lalonde said. The cost to the federal government of block funding for the first year of operation is estimated to be \$707 million.

The highlights of the block-funding proposal include:

- federal contribution for 1978-79 and onward would be determined by a formula and paid to the provinces independent of their actual expenditures on social services;
- block financing is being offered for those social services and activities agreed upon in June 1976 at the Federal-Provincial Conference of the Ministers of Welfare, and subsequently included in the proposed Social Services Act;

- the existing cost-sharing arrangements in respect of the income maintenance provisions of the Canada Assistance Plan will be retained in order to continue to provide more funds to provinces with higher unemployment rates and greater assistance expenditures;
- based on current projections of the rate of growth, the national average per capita contribution which will be \$22 in 1977-78 would rise to a projected \$70 per capita in 1987-88 under the new approach.

In addition, there would be a levelling factor in the block-funding formula for determining the actual federal contribution, so that at the end of a 10-year period all provinces would be at the national per capita average.

By simplifying our financial arrangements through block financing, far fewer administrative and accounting steps will be needed and a wider range of service delivery options will be possible, Mr. Lalonde said.

Ref.: John Olson

Tel.: (613) 996-4950

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news release

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October 6, 1977

FIRST LIFESTYLE AWARD RECIPIENTS ANNOUNCED

OTTAWA - Health and Welfare Minister Monique Bégin today announced the names of 12 Canadians selected as the first recipients of the Lifestyle Award for their contribution in the promotion of positive health lifestyle in their communities.

The Lifestyle Award program is an element of Operation Lifestyle, a public education campaign developed by the department to encourage Canadians to assume greater responsibility for their own health.

Since the program was first announced last January, Canadians have been encouraged to nominate individuals who have worked to raise the level of health awareness in their community. Besides bringing well-deserved recognition to these individuals, it is hoped that the Lifestyle Award Program will also serve to reinforce voluntary activities of this nature among all Canadians.

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In announcing the names of recipients, the Minister commended them for actively giving of their time and energy on a volunteer basis to the improvement of health habits and health services in the community.

The Minister will honour recipients at an awards presentation ceremony in Ottawa, October 14.

- 30 -

Ref: Michael Alexander

Tel: (613) 996-4950

Note to Editors: Media are invited to attend presentation ceremony in the Railway Committee Room, Room 253-D, Centre Block, October 14, 10:45 a.m.

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Jean-Marie Mouchet, Whitehorse, Yukon Territory - Priest and Teacher
As initiator of the ski program for native children in Old Crow, Father Mouchet's Territorial Experimental Ski Training Program (TEST) has gained national and international recognition.

Lila Rose Dickey, West Vancouver, British Columbia - Housewife
Mrs. Dickey has been nominated by the British Columbia Association for the Mentally Retarded for her leadership in programs of community residences for retarded children and adults, and in programs of volunteer training and development.

Bert Knibbs, Bow Island, Alberta - Merchant
For the past 30 years Mr. Knibbs has devoted time and energy to coaching and promoting sports and recreation in his community from the peewee stage to seniors. This participation has earned him the title "Mr. Sport" in Bow Island and district. He was actively involved in the 1975 Canada Winter Games and has been elected to the Alberta Sport's Hall of Fame for outstanding service and achievement in amateur sport.

Ruben Burns, Prince Albert, Saskatchewan - Federation of Saskatchewan Indians
A treaty Indian who has worked for good health lifestyles among his people for the past 15 years, Mr. Burns has gained the respect and confidence of Indian leaders and health professionals for his honesty and forthright concern.

Marie Salway, Neepawa, Manitoba - Health Educator
Described as a pioneer in the development of family life education in schools and women's institutes and of farm safety programs, Mrs. Salway led in the establishment of a community association for the mentally handicapped as well as the development of a sheltered workshop.

Charles Rhéaume, Ottawa, Ontario - Retired
Seriously stricken with polio as a youth, Mr. Rhéaume devotes all of his spare time to helping those who need help. In recent years he has been active in the rehabilitation of alcoholics and the establishment of a halfway house. He has also been actively involved in promoting the visual arts for handicapped artists and has founded an association for French-speaking handicapped people in Ontario.

Herman Smith-Johannsen, Piedmont, Quebec - Retired Engineer
This remarkable 101-year-old ski enthusiast has been actively involved for many years in developing cross-country skiing as a mass sport in Canada and the U.S. He has laid out cross-country ski trails in Quebec and consulted in setting up trails in other regions of Canada.

Rosanne Laflamme, Quebec City, Quebec - Teacher

After losing both legs and an arm as the result of a childhood accident, Miss Laflamme has become a paramount example to all handicapped people. In 1975 she won gold, silver and bronze medals at the Olympics for the Handicapped in St. Etienne, France. She has also written an autobiography to encourage other handicapped people and is actively involved in promoting the cause of the disabled.

Kathryn Barnes, Moncton, New Brunswick - Housewife

An active member of the home and school association, Mrs. Barnes has promoted anti-smoking campaigns in Moncton for many years. She is a founding member of the Moncton Non-Smokers Association and active on the New Brunswick Council of Smoking and Health. Working closely with city police and volunteer agencies, she has recently helped organize a Block Parent program for the Moncton area.

Adrian Pearson, Stellarton, Nova Scotia - Town Clerk

Nominated by St. John Ambulance for outstanding service in instructing first aid, Mr. Pearson has also rendered long service to the community as a Scoutmaster and as an Air Cadet leader and instructor.

William Reid, Charlottetown, Prince Edward Island - Retired Army
Officer

Brigadier-General Reid has given outstanding leadership to Scouts and other youth organizations in P.E.I. for 40 years. He has given particularly valuable support to the Canadian and World Jamborees of Scouting and devoted two years to planning the 1977 Jamboree in P.E.I.

Charles Andrew, Northwest River (Labrador), Newfoundland -

Dental Technician

Mr. Andrew has spent the last four years working with young people in the community. He has also initiated an innovative program to combat alcoholism and has been nominated by the Naskapi Montagnais Innu Association as an outstanding example of how one person can overcome that problem.

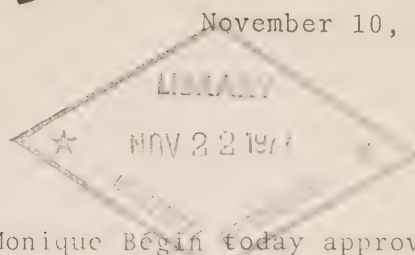
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news release

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November 10, 1977

Health and Welfare
\$150,000 CONTRIBUTION TO
INTERNATIONAL INSTITUTE OF STRESS



OTTAWA - Health and Welfare Minister Monique Bégin today approved a \$150,000 contribution from her department to the International Institute of Stress in Montreal.

The non-profit institute, under the direction of celebrated scientist-philosopher Hans Selye, seeks to promote research on the mechanisms of stress and stress-induced disease. Through international discussion and education on the problems of stress in modern society, founders of the institute hope to develop methods of coping with stress. Their inter-disciplinary approach will include research on the stressor effects of accelerated urbanization, the design and use of public buildings for maximum health benefits and the creation and evaluation of stress tests.

Using the contribution provided by the department, the International Institute of Stress plans to stage a symposium on stress, cancer and death, involving 20 specialists on different aspects of this topic. The institute will also offer a series of workshops on living under stress, to be presented in various cities across Canada, as well as international conferences dealing with a variety of stress-related topics.

- 30 -

Ref: Michael Alexander

Tel: (613) 996-4950



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news release

1977 - 183

December 28, 1977

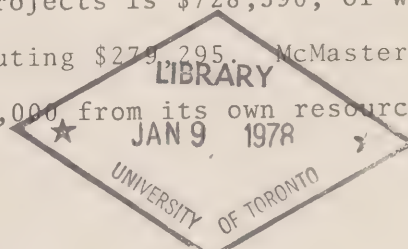
\$1,060,607 FOR ONTARIO HEALTH TEACHING FACILITIES

OTTAWA - Health and Welfare Minister Monique Bégin today approved contributions totalling \$1,060,607 for five Ontario medical teaching facilities from her department's Health Resources Fund. The facilities and amounts involved are:

McMaster University, Hamilton \$364,295

For completing and expanding three projects which had been delayed because of previous budget restrictions. The university's medical library will use \$120,052 of the contribution for expansion and renovation; one of the Medical Science Centre lecture theatres will use \$102,000 to provide extra teaching space; the remaining \$142,243 will go to the cardio-respiratory and cardio-vascular research laboratories for the completion of those facilities.

The total cost of these projects is \$728,590, of which the Province of Ontario is contributing \$279,295. McMaster University will make available \$85,000 from its own resources.



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Queen's University Basic Science/Library Building,
Kingston \$66,860

To provide water and sanitary sewer services to this new building. Total cost of the project will be \$133,720, of which the Province of Ontario is contributing the remaining \$66,860.

George Brown College School of Nursing, Toronto \$426,952

To consolidate teaching activities for its nursing program, currently spread throughout the city in five different rented facilities, into one central location at the institution's St. James campus. Costs of this relocation will amount to \$853,904, of which the Province of Ontario will contribute the remaining \$426,952.

Canadore College, North Bay \$75,000

Renovations to provide 49 students with proper facilities equipped with x-ray, dental and other equipment. This contribution has been matched by an equal amount from the Province of Ontario.

Fanshawe College, London \$127,500

To provide teaching accommodation for 48 students studying additional programs in dental hygiene and preventive dental health. This contribution has been matched by an equal amount from the Province of Ontario.

Ref: Michael Alexander

Tel: (613) 996-4950

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-N26

news release

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1978 - 14

January 26, 1978

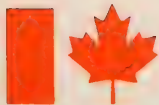
MONTREAL NEUROLOGICAL INSTITUTE TO RECEIVE FEDERAL CONTRIBUTION

OTTAWA - Health and Welfare Minister Monique Bégin today announced the approval of a \$7,262,983 contribution from the federal Health Resources Fund to the Montreal Neurological Institute.

This funding will assist with construction of the Wilder Penfield Pavilion, named after the world-famous neurosurgeon and founder of the institute, together with renovations of the present building to provide additional space for training and research.

Because the type of research and training carried out at the Institute constitutes a unique contribution in the field of brain sciences such as epilepsy and stroke conditions, this contribution is made up of 87 per cent from the national significance portion and 13 per cent from the provincial per capita portion of the Health Resources Fund. The impact of studies undertaken at the Montreal Neurological Institute has national and international

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implications; it is the only neurological institute in Canada and is recognized as one of five collaborating centres for teaching and research in the neurosciences by the World Health Organization.

Total costs of construction and renovations at the Institute are estimated at \$14,525,966. The difference between final construction and renovation costs and the amount contributed by the Health Resources Fund will be met by the Institute and the Province of Quebec.

Ref: Michael Alexander

Tel: (613) 996-4950

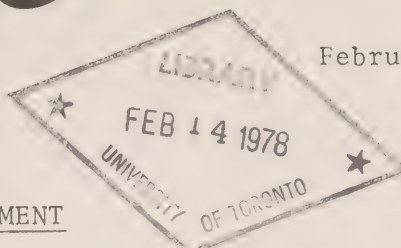


news release

Govt
Publie

1978 - 20

February 6, 1978



HASEPS TO PROVIDE STUDENT EMPLOYMENT

OTTAWA - Health and Welfare Minister Monique Bégin today announced details on the department's Health Activities Summer Employment Program for Students. The \$920,000 program, to be administered by the department's Health Programs Branch, will enable health related organizations and other voluntary groups to hire approximately 450 students across Canada.

As part of the federal government's Canada Summer Youth Employment Program, the program will provide various health related organizations and other voluntary groups with the necessary funds to hire post-secondary level students to work on projects that these organizations would not normally be able to fund.

The 450 jobs created by the program will provide up to 15 weeks of work for each student. Students should apply directly to the local Canada Manpower Centres for further information and state their interest for health projects.

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Bien-être social
Canada

Health related organizations and other voluntary groups should submit their applications to Health Programs Branch, Department of National Health and Welfare, Room 623, Jeanne Mance Building, Ottawa, Ontario K1A 1B4, before February 28, 1978. The organizations which have their applications approved will be required to contact Canada Manpower or Canada Student Manpower Centres to obtain candidates for projects.

The main objectives of the Health Activities Summer Employment Program for Students are:

1. Providing post-secondary students with a positive summer work experience in the health field;
2. assisting health related organizations and other voluntary groups with the gathering of new knowledge that relates to improvement in the health of Canadians. This would include improvements in lifestyle, environment, human biology and health care organization as elaborated in A New Perspective on the Health of Canadians.

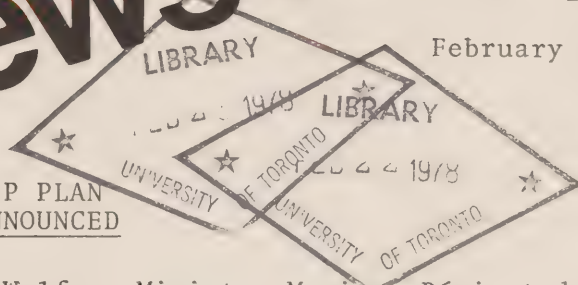
Ref: Michael Alexander

Tel: (613) 996-4950

1978 - 23

February 15, 1978

VISITING PROFESSORSHIP PLAN
AWARDS FOR 1978-79 ANNOUNCED



OTTAWA -- Health and Welfare Minister Monique Bégin today announced awards under her department's Visiting Professorship Plan to the Department of Social Work at the Université de Moncton and the School of Social Work at the University of Manitoba.

Dr. Glenn Drover, of McGill University, Montreal, will be a Visiting Professor at the Université de Moncton from July, 1978 until June, 1979. Professor Drover will teach a social policy course, co-ordinate the sequence of courses on social welfare policy, as well as set up a social policy bibliography placing emphasis on texts in French and those that are relevant to the Maritimes. He will also assist the Department of Social Work in strengthening the teaching of social policy.

The team of Professor Philip Bean, of the Department of Applied Social Science at the University of Nottingham, in England, and Professor Valerie Bean, of the School of Social Work of the University of Leicester, in England, will be at the School of Social Work of the University of Manitoba, in Winnipeg, from January 1 to June 30, 1979.

... 2



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Both professors will teach graduate and undergraduate students and will act as tutors for individual students in the area of deviancy and corrections. Professor Philip Bean will also act as a consultant to other university departments, the community, and the faculty on the enrichment of the deviancy and corrections program. Professor Valerie Bean will consult on field instruction in order to increase effectiveness of field work as a learning experience.

The Visiting Professorship Plan, under the National Welfare Grants program of the Department of National Health and Welfare, is designed to help strengthen and improve the quality of undergraduate and graduate training programs in the social welfare and health service fields. This has been carried on through the appointment of recognized scholars and practitioners who have made significant contributions to the enhancement of social welfare in Canada and abroad to faculties for varying periods during an academic year.

Ref: John Olson

Tel: (613) 996-4950

MONIQUE BÉGIN ANNOUNCES NATIONAL WELFARE GRANTS

OTTAWA -- A \$22,000 demonstration grant to enable the University of Manitoba School of Social Work to place counsellors in two industries is among eight National Welfare Grants announced today by Health and Welfare Minister Monique Bégin. The grants total \$132,008.

They cover a wide range of demonstration and research projects and other activities in the social welfare field.

National Welfare Grants are designed to promote improvements and innovation in welfare services by providing financial assistance, consultation, information and advice to welfare agencies for short-term research, demonstration and other project activities.

Attached is a list of the approved grants.

- 30 -

Ref: John Olson

Tel: (613) 996-4950



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NATIONAL WELFARE GRANTS

NATIONAL ORGANIZATIONS

Board of Directors of the Canadian Journal of
Poverty Law - Winnipeg, Manitoba \$35,000

A grant for the publications: Canadian Journal of
Poverty Law and the Canadian Digest of Poverty Law.

The funds will be used for the preparation and dissemination of court decisions and articles pertaining to poverty law.

NORTHWEST TERRITORIES

Mothers and Tots Drop-in Centre - Yellowknife 8,676

A three-year demonstration grant to provide a child development drop-in centre for pre-school children and their mothers. The centre will strive to alleviate problems associated with the raising of children in a northern setting.

ALBERTA

Department of Psychology, University of Calgary 16,328

Research project to make use of advances in multi-variate computer designs and to evaluate long-term results of rehabilitation programs for the adult mentally handicapped.

MANITOBA

School of Social Work, University of Manitoba - Winnipeg 21,894

A demonstration grant to place experienced social worker counsellors in two industrial settings -- the Manitoba Telephone System in Winnipeg and the United Steel Workers of America Union Hall in Thompson. The project will explore the effects of offering an accessible, confidential preventive counselling service to employees who may have personal or family problems.

ONTARIO

Department of Psychiatry, McMaster University - Hamilton \$16,460

A grant to complete an automated user-oriented evaluation literature retrieval system for social services material.

Department of Social Work, Atkinson College,
York University - Toronto 2,400

A grant to develop a research project concerned with the attitudes of East and West Indians in connection with discrimination.

School of Social Work, Carleton University - Ottawa 5,700

The Centre for Social Welfare Studies at the university will develop an extensive inventory and compile an annotated bibliography of materials relevant to the teaching of Social Administration and Policy.

QUÉBEC

Comité de Liaison - Contact (liaison-contact committee) -
Grandes Bergeronnes 25,550

This project will provide 14 municipalities in the western section of Québec's North Shore region with technical resources that will encourage local residents to take control of their economic and social development. The local population will have the opportunity to bring about and direct projects dealing with such varied areas as tourism, handicrafts, agriculture, silviculture, services and processing industries.

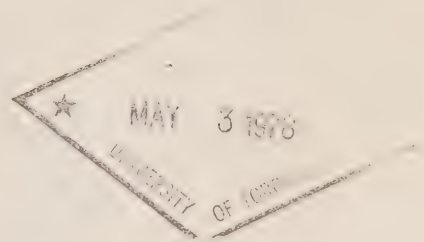


news release

Government
Publication

1978-63

April 24, 1978



FEDERAL CONTRIBUTION TO QUEEN'S UNIVERSITY

OTTAWA - Health and Welfare Minister Monique Bégin today announced a \$143,017 contribution from her department's Health Resources Fund for health teaching facilities at Queen's University, Kingston. The Province of Ontario will contribute \$572,560.

Queen's University will strengthen its research and education capacity in the fields of medicine and surgery by increasing its faculty and providing appropriate office and research facilities.

The new laboratories will be located in Etherington Hall, adjacent to the Kingston General Hospital.

The increased emphasis on clinical research and the location of such research facilities contiguous to clinical service areas follows the recommendations of the Task Force on Health Research Requirements (The Petch Task Force).

- 30 -

Ref: N.-René Mercier

Tel: (613) 996-4950



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and Welfare
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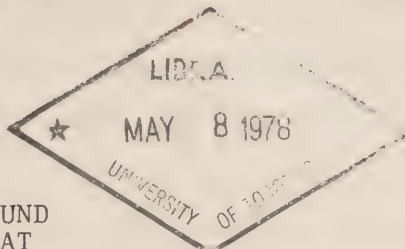
Santé et
Bien-être social
Canada



news release

1978-64

April 27, 1978



TWO SAMPLES OF MARIJUANA FOUND TO CONTAIN HERBICIDE PARAQUAT

OTTAWA - Tests conducted by the Health Protection Branch of the Department of National Health and Welfare on 33 samples of marijuana seized across Canada have shown two samples to contain traces of the herbicide, Paraquat.

One sample, seized by the RCMP in the Oakville, Ontario area, was found to contain 170 parts per million (ppm) of Paraquat. The other, seized in the Oshawa, Ontario area, contained 150 ppm of the herbicide.

Tests have been conducted over the past several weeks on samples of marijuana seized by the RCMP across Canada.

The origin of the two samples found to contain Paraquat is unknown; nor is it known for certain what the exact effects on health are of smoking or ingesting marijuana containing the concentrations of Paraquat found to date. However, it is known that inhalation of Paraquat can cause irreversible lung damage.



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Persons who smoke marijuana should recognize that the possible presence of Paraquat residues adds an additional potential health hazard to those already known to be associated with the use of cannabis. The symptoms of Paraquat poisoning include severe anemia, nose bleeds, diarrhea and eye irritation.

In the United States, where the incidence of Paraquat contamination of marijuana seems to be much more extensive, the Center for Disease Control in Atlanta has instituted an epidemiological program to study longer-term health effects related to the toxicity of Paraquat. Their findings will be made available to the Health Protection Branch.

Ref.: Michael Alexander

Tel.: (613) 996-0446



news release

1978 - 70

May 10, 1978

Government
Publications

NATIONAL WELFARE GRANTS

OTTAWA - A \$2500 grant to study the feasibility of establishing a family therapy centre in Vancouver is among five National Welfare Grants announced today by Health and Welfare Minister Monique Bégin. The grants total \$35 741.

They cover a wide range of demonstration and research projects and other activities in the social welfare field.

National Welfare Grants are designed to promote improvements and innovation in welfare services by providing financial assistance, consultation, information and advice to welfare agencies for short-term research, demonstration and other project activities.

Attached is a list of the approved grants.

- 30 -

Ref.: John Olson

Tel.: (613) 995-8465



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NATIONAL WELFARE GRANTS

NATIONAL ORGANIZATIONS

Canadian Association of Social Workers - Ottawa \$16 000

A grant to assist with the publication of the national professional journal -- "The Social Worker/Le Travailleur Social".

Canadian Association of Schools of Social Work-Ottawa \$ 5221

A grant to help the association conduct a one-day evaluation of its program.

BRITISH COLUMBIA

Ad Hoc Planning Committee for Family Therapy Centre - Vancouver \$ 2500

A grant to study the feasibility of establishing a community-based centre which will offer; training in family therapy, consultative services to institutions and agencies, research on issues related to families, and services to families.

QUEBEC

Catholic Community Services Inc. - Montreal \$ 4300

A design grant to develop material for measuring the social health of a family.

Laboratoire de Recherches sociologiques, Université Laval - Ste. Foy \$ 7720

A grant to permit the printing of additional copies of the five-volume report -- Facteurs d'interaction conjugale et planification des naissances en milieu défavorisé urbain québécois -- so that it can be widely distributed to persons working in the field of family planning.



news release

Gouvernement
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1978 - 71

May 11, 1978

CANADA HEALTH SURVEY BEGINS

OTTAWA - The Canada Health Survey, a national study to obtain information on the health status and risk exposure of the Canadian population, gets under way May 15 in the Atlantic provinces. It begins in Quebec and Ontario on June 12, followed by the Prairie provinces and British Columbia on July 3.

Approximately 12,000 homes -- 38,000 individuals -- will be visited each year during the on-going survey. A selection of residents of 78 communities across the country will be involved this year. Households will be chosen at random by Statistics Canada, which is co-sponsoring the survey with the Department of National Health and Welfare.

An interviewer will visit each household and complete a general questionnaire about its members, their health and use of health care facilities. Each member of the household 15 years of age and over will be asked to complete a confidential, self-administered questionnaire focussing on the lifestyle areas of exercise, smoking, alcohol use and driving.

In one-third of the households a nurse will return with the interviewer to conduct a series of physical measures and tests. These involve measurements for blood pressure, height, weight, and skinfold



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thickness, taking blood samples to assess immunity and other risk factors, as well as administering the Canadian Home Fitness Test which measures heart/lung efficiency. Every member of the household aged two and over will be asked to participate in some or all of the physical measures; all measurements will be taken in the home. Results of the tests will be mailed to participants and, if they wish, to their family doctors. Individuals will be free to choose to participate or not in the survey.

Data obtained in the Canada Health Survey will complement existing information, which now comes primarily from vital statistics and health insurance records, and will be used by provincial and federal governments, professional associations and university researchers for health planning purposes. In particular, because the survey studies exposure to the risks of future disease, it will be possible to plan to reduce these risks and thus avert later problems.

The Canada Health Survey is unique in its content and design. While surveys undertaken by other countries focus on morbidity and health care delivery, the Canadian survey places more emphasis on lifestyle and positive health. It is also more extensive than other studies in the range of information collected, using interviews and physical measurements; it is more convenient than many medical surveys because measures are obtained from participants in their homes.

The first results from the Canada Health Survey should be available in 1979, with yearly reports thereafter.

Ref.: N. René Mercier

Ref.: Tamara Galko

Tel.: (613) 995-8465

Tel.: (613) 995-1064

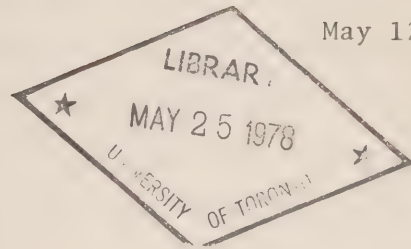
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news release

Government
Publications
1978 - 72

May 12, 1978



MONIQUE BÉGIN INTRODUCES BILL FOR BLOCK FUNDING OF SOCIAL SERVICES

OTTAWA - Increased funding and greater flexibility for the provinces form the basis of social services financing legislation introduced in the House of Commons today by Health and Welfare Minister Monique Bégin.

The legislation provides for federal government contributions for social services such as day care for children, transportation for the disabled and home support services. The federal government contribution to social services will rise over a 10-year period to \$70 per Canadian from the current national average of \$22. In 1978-79, the first year of the new financing approach, about \$577 million will be paid to the provinces and territories. The federal contribution will grow to approximately \$1.9 billion in 1987-88.

Under the proposed Social Services Financing Act, provinces will receive lump-sum payments for social services rather than payments based on actual expenditures of which the federal government paid approximately 50 per cent under the Canada Assistance Plan. A renewed and conditional shared-cost approach had been proposed in the social services bill introduced in the House of Commons in June 1977. However,



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after provinces had expressed their desire for greater flexibility, federal and provincial welfare ministers met in Ottawa March 6 and 7, and agreed to adopt a block-funding approach. A similar funding arrangement has been in effect since April 1977 for health services.

Federal government contribution under the block-funding agreement will be based upon a formula which takes into consideration the amount of money the provinces received in 1977-78 for social services under the Canada Assistance Plan, the Vocational Rehabilitation of Disabled Persons Act, and the Young Offenders agreements in some provinces. In addition, the fund will be increased each year based on the growth of the Gross National Product and of the population. In addition, approximately \$150 million will be added to the block fund next year in order to provide for further development of new services. Over a 10-year period, provincial differences above or below the current national average contribution to social services by the federal government will be eliminated.

"This Social Services Financing Bill signals the beginning of a new era of federal-provincial co-operation," said the Minister. "And it is co-operation based on trust. Although concerns have been expressed about the freedom provinces will now have to spend these funds as they decide, I have every confidence that the provinces will continue to meet the social services needs of their area. Both the federal government and the provinces are committed to providing as effective and appropriate a network of social services as economically as possible."

Miss Bégin stated: "This new arrangement will provide for the development of social services, and will also allow the provinces to have greater flexibility in order to meet their own requirements."

The Minister advised that she will be kept informed of provincial programs through the provision of program and cost data by the provinces.

While specific social services will be determined by the provinces, it is expected that they will include the following:

- crisis intervention,
- information and referral,
- family planning,
- children's services,
- rehabilitation services,
- social integration services,
- day care for children,
- home support services,
- meal services,
- day care for adults,
- transportation services for the disabled,
- counselling,
- employment-related services,
- community development services,
- community-oriented preventive services.

The bill also calls for the establishment of a \$50 million Rehabilitation Fund, which will provide cost sharing in capital expenditures of building or improving rehabilitation centres and making community facilities more accessible to the handicapped.

Funding under the proposed Social Services Financing Act should be effective retroactively to April 1, 1978, as agreed to at the federal-provincial meeting in March.

Direct social assistance to individuals (welfare) will continue to be cost-shared with the provinces by the federal government under the Canada Assistance Plan and will not be affected by this Bill.

- 30 -

Ref: John Olson

Tel: (613) 995-8465



news release

Government
Publications

1978 - 80

May 23, 1978

NEW FEDERAL "CONNECTION" FOR SENIOR CITIZENS

OTTAWA - Health and Welfare Minister Monique Bégin today announced the creation within her department of a Bureau on Aging, to improve communications between the department and Canada's senior citizens and organizations working on their behalf.

The announcement was made in a speech delivered by Miss Bégin at the Third National Conference of Canadian Pensioners Concerned Inc., in Halifax.

The Minister noted that the Bureau on Aging will become the focal point within her department to identify and keep abreast of issues related to aging and the aged. Serving as a communications link between the Federal government, provincial governments and organizations for the aged, the Bureau will thus become the contact point for individuals and senior citizens' organizations.

Among the many organizations which have recommended the creation of such a national bureau on aging, are the Canadian Labour Congress, the National Pensioners and Senior Citizens Federation as well as the Canadian Pensioners Concerned Inc. A number of provincial advisory councils or commissions on aging have also indicated a desire for liaison with a national office.

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- 2 -

Miss Bégin expressed hope that full use will be made, across the country, of this new "connection" on aging. All interested persons and groups will be advised once the new Bureau commences operations in the fall.

- 30 -

Ref.: J. Olson
Tel.: (613) 995-8465



news release

Government
Publications

1978 - 81

May 24, 1978

CANADIAN PHYSICIANS ADVISED ON CONTAMINATED BREAST MILK

OTTAWA- An expert committee which recently looked at the risks and benefits of breast feeding is of the opinion "that in view of the benefits of breast feeding, in most instances it would be advisable to continue nursing". The report of the committee was made public today by Health and Welfare Minister Monique Bégin.

The committee was composed of representatives of the Canadian Paediatric Society and the Pharmacological Society of Canada, as well as experts in toxicology from Canada and the United States. These experts considered the potential problems arising from the contamination of human milk by a class of organic chemicals known as polychlorinated biphenyls (PCBs). PCBs were widely used in Canada for over 40 years, but are now permitted for use only in certain electrical equipment, under carefully controlled conditions.

PCBs have been found to accumulate in components of the food chain, notably fish, and therefore can ultimately be passed on to human milk. As a result of actions to control industrial



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uses of PCBs, the levels at which they are found in Canadian foods are declining. A preliminary survey conducted throughout the country in 1977 by the Department's Health Protection Branch indicated that PCB levels in mother's milk ranged between one and sixty-eight micrograms per kilogram ($\mu\text{g}/\text{kg}$) of whole milk. The main sources of PCBs include occupational exposure and game fish from water contaminated with PCBs, such as those of the Great Lakes Basin. Women from this area and those who have had industrial exposure to PCBs and wish to breast feed their babies should consult their physician.

A decision as to whether a woman should have her breast milk tested for PCBs should be made after careful assessment of her lifetime history of exposure to these chemicals. On the basis of available evidence on the safety of PCBs to animals, the committee recommended that where PCB levels in human milk are above 50 $\mu\text{g}/\text{kg}$ of milk, physicians should consider carefully the mother's history, the child's birth weight, general conditions and subsequent growth and development in advising the mother on breast feeding. In most instances, given the known benefits of breast feeding, it would be advisable to continue nursing. The committee recommended that more studies be conducted on the health effects of PCBs on humans.

The report has been sent to physicians and other health care workers who advise women regarding breast feeding. Sampling instructions for PCBs in breast milk have also been sent as an attachment to the report.

NOTE: The report is available on request.

Ref.: Michael Alexander

Tel.: (613) 996-0446



news release

Government
Publications

1978 - 82

May 25, 1978

FLUORIDATION AND CANCER

OTTAWA - A report released today by Health and Welfare Minister Monique Bégin concludes that the differences in cancer death rates between municipalities are not associated with water fluoridation. The report also shows no significant differences between death rates from all types of cancer within the same municipalities before and after fluoridation.

The study, entitled "Fluoridation and Cancer -- An Analysis of Canadian Drinking Water Fluoridation and Cancer Mortality Data", is based on data from Statistics Canada which has been analysed for the Health Protection Branch.

Today small amounts of fluoride are added to the drinking water supplied to more than 35 per cent of the Canadian population in order to decrease the incidence of tooth decay and lower dental care costs. However some doctors and scientists have suggested that epidemiological data show the addition of fluoride to potable water increases the risk of cancer. Official U.S. sources whose data have been used to support such statements claim their data have been misinterpreted.

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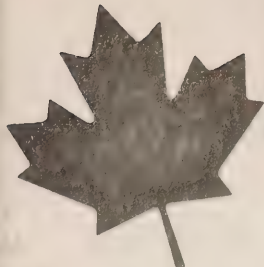
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To determine whether Canadians are exposed to a risk of cancer from the fluoride added to their drinking water, cancer mortality statistics from 79 groups of municipalities were examined closely. Comparisons of death rates from cancer were made between municipalities served with fluoridated water and those served with non-fluoridated water. In addition, comparisons were made for different time periods between 1954 and 1973. All general and malignant tumors and various specific tumor sites were included in these comparisons.

Ref.: Michael Alexander

Tel.: (613) 996-7170

Copies of this report are available on request.



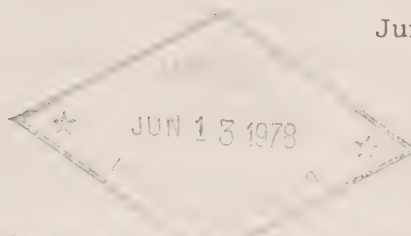
from the office of the minister of national health and welfare
the Honourable Monique Bégin

Gouvernement
Publications

1978 - 84

June 1, 1978

FURTHER FEDERAL FUNDS
FOR BIOMEDICAL RESEARCH



OTTAWA - Biomedical researchers are to receive additional federal funding in 1978 - 1979. The Honourable Monique Bégin, Minister of National Health and Welfare, today announced a supplement of \$3 million in the allocation to the Medical Research Council, the agency which has the major responsibility for federal funding of university research in medicine, dentistry and pharmacy. This brings to \$63 002 000 the Council's budget for the support of research in 1978-79, an 11.8% increase over 1977-78.

The announcement is part of a more inclusive statement by the federal government of recently approved policy with respect to research and development in all areas.

In announcing the supplement, Miss Bégin stressed the special interest of the government in making additional funds available for research in areas of concern or opportunity for Canada. The Medical Research Council already has devoted major funds to special initiatives in clinical trials of modalities of treatment of cancer and stroke, and has embarked upon a developmental program of research related to heart disease, all areas of major



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causes of death in Canada. The infusion of new funds will permit such work to move forward more rapidly. It will also be of direct and immediate benefit to the MRC's long-standing program directed towards the reduction of regional disparities in the biomedical research effort across Canada, and will prevent the dismantling or curtailment of some research programs which were in jeopardy. The details of the use to be made of the additional funds for 1978-79 will be decided by Council at a meeting on June 14 - 16.

On the other hand, the matter of long term funding of biomedical research is under active consideration and is an urgent priority of the newly appointed President of the Medical Research Council, Dr. René Simard. The Minister indicated that she hoped to make a positive announcement in this regard in the near future.

Ref.: Dr. J.M. Roxburgh

Tel.: (613) 996-8172

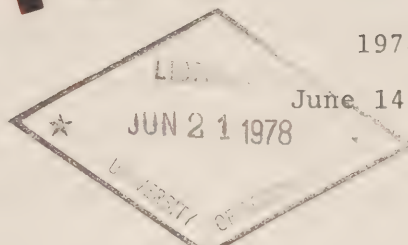


news release

Government
Publications

1978 - 92

June 14, 1978



OLD AGE SECURITY PAYMENTS RISE IN JULY

OTTAWA - Increases in the Old Age Security pension, Guaranteed Income Supplement and Spouse's Allowance, effective in July, 1978, were announced today by Health and Welfare Minister Monique Bégin.

Increases in Old Age Security pension and Guaranteed Income Supplement payments represent the nineteenth quarterly escalation based on the cost of living, as provided for in the Old Age Security Act since October, 1973.

The new monthly total at the single rate for persons receiving both the basic Old Age Security pension and maximum Guaranteed Income Supplement will be \$271.87.

For a married couple, both pensioners, the combination of the basic pension and maximum supplement will provide a payment of \$518.62 for the couple monthly.

The basic Old Age Security pension will rise in July to \$159.79 from the present \$156.66.

The Guaranteed Income Supplement is paid to pensioners whose income, apart from the Old Age Security pension, is limited. The amount of the supplement varies in relation to the amount of income.

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The maximum Guaranteed Income Supplement for a single person, or a married person whose spouse is not a pensioner and is not receiving a Spouse's Allowance, will go up in July to \$112.08 from its current \$109.88. The maximum supplement for a married couple, both pensioners, will increase to \$99.52 each from \$97.57. Added to the basic pension, this will give each married pensioner \$259.31 monthly, or a total of \$518.62 for the couple.

The Spouse's Allowance is paid to persons between 60 and 65 years of age who are married to Old Age Security pensioners and meet residence requirements. Entitlement to a Spouse's Allowance, and amount paid, is based on yearly income.

The maximum Spouse's Allowance will increase to \$259.31 from \$254.23. The maximum Spouse's Allowance is made up of an amount equivalent to the basic Old Age Security pension and the maximum Guaranteed Income Supplement at the married rate.

Ref.: N.-René Mercier

Tel.: (613) 995-8564

1978 - 98
July 12, 1978

SAFEGUARDS FOR RECOMBINANT DNA RESEARCH

OTTAWA - Health and Welfare Minister Monique Bégin and the Honourable Judd Buchanan, Minister of State for Science and Technology, and Minister of Public Works, today jointly announced the government's intention to establish procedures to protect against the potential hazards of recombinant DNA research, while still allowing such research to be carried on.

Following consultations with the provinces, regulations will be established by Order in Council under the Department of National Health and Welfare Act which will require all recombinant DNA activities in Canada to be carried out under the safeguards specified by the Medical Research Council (MRC) in its 1977 recombinant DNA guidelines, or in future modifications of these guidelines.

DNA, deoxyribonucleic acid, controls the reproduction, function and growth of all living cells. Recombinant DNA is created by adding DNA elements from one organism to the DNA of a second organism which then reproduces the properties controlled by the combined DNA.



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Recombinant DNA techniques are generally regarded as a powerful new tool which could facilitate rapid advances in genetic and medical science, and could have numerous practical applications such as the creation of bacteria to produce insulin and other important chemicals.

Although concern has been expressed that recombinant DNA research may result in harmful microorganisms, recent scientific evidence indicates that these risks may be less than initially perceived. Nonetheless, certain protective measures are still considered to be necessary.

In February 1977, MRC, the government granting agency responsible for funding medical and health-related research, announced guidelines which its grantees must follow in recombinant DNA research. These guidelines, similar to those adopted in the United States, the United Kingdom and several other countries, have also been adopted by the National Research Council and other federal departments and granting agencies.

The guidelines classify different types of recombinant DNA experiments by the degree of risk involved, and require the use of special laboratory equipment and procedures.

No recombinant DNA research was conducted in Canada prior to establishment of the MRC guidelines, but it is expected that 10 to 15 projects will be underway in Canadian universities within the next year. All of these will be funded by agencies requiring adherence to the guidelines; all are in the low-to-medium-risk category.

Concerns have been expressed, however, that to ensure the protection of public health the guidelines should apply to recombinant DNA research which might be undertaken by industry or other non-federally-funded organizations.

The actions announced today would extend compulsory compliance with the MRC guidelines to all research and other activities in Canada involving recombinant DNA. No new legislation will be required, as the regulations will be established under existing provisions of the National Health and Welfare Act. Administration of the regulations will rest with the Health Protection Branch except in the case of MRC and NRC recipients, who will continue to be administered by their respective granting agencies.

These actions reflect the government's judgment about measures that should be taken to protect public health. They also indicate government recognition that current recombinant DNA controls may require future modification in response to additional scientific knowledge and to input from an informed public on the content and administration of these controls.

Ref.: Ysabelle Le Sieur

Tel.: (613) 996-0446

NOTE: Copies of the background paper outlining the various factors considered by the government in arriving at these actions are available on request.

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THE CENTRAL REGIMEN FOR RECOMBINANT
DNA RESEARCH IN CANADA

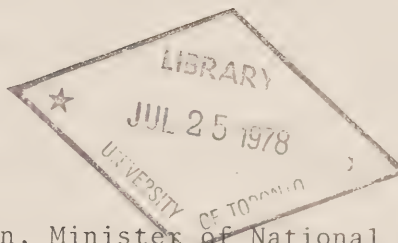


news release

Government
Publications

1978 - 99
July 13, 1978

FEDERAL CONTRIBUTION TO INTERNATIONAL YEAR OF THE CHILD



OTTAWA - The Honourable Monique Bégin, Minister of National Health and Welfare, today announced that the federal government will contribute \$1 000 000 to the private sector for projects and activities for Canadian participation in the International Year of the Child.

The Minister anticipates the federal contribution for the International Year of the Child will be administered by a Canadian Commission composed of representatives of the federal and provincial governments, voluntary organizations and Canadian citizens who have contributed to the improved well being of children and families. Details of the establishment of the Commission will be announced later this month when consultations with the provinces and the private sector have been completed.

The \$1 000 000 federal contribution is in addition to other projects to be undertaken by federal departments as well as the administration costs of the Commission. The latter will be paid for by the Department of National Health and Welfare.



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Miss Bégin looks forward to the Year of the Child providing all Canadians with an opportunity to concern themselves with the quality of life and care of children across the country. Parents are especially invited to participate in this undertaking. "The Year of Child comes at a point in time for us to evaluate what impact the rapid growth of the sixties has had on the children of Canada and what share of public services and resources should be theirs in order to meet their needs", added the Minister.

The Minister noted she would recommend to the Commission that the federal contribution be used to support projects targetted towards children's services involving both parents and children. In addition to the happy events associated with such an international year devoted to children, Miss Bégin feels that Canadians would wish to hear of programs that will have a durable and long-lasting effect on the quality of life of young Canadians. "It is evident that families have pressing needs for particular services to assist them in the care required by children. It is hoped the Year of the Child will generate in each community a desire to develop these services", the Minister said.

The national commission, in addition to administering the one million dollar federal contribution, will endeavor to raise public and private funds to support Year of the Child activities and projects. Its other major purposes will be to create an awareness of the needs of Canadian children and to act as an information and resource centre for all provinces, communities, private groups and individuals interested in the Year.



news release

Government
Publications

1978 - 100

July 14, 1978

UNIVERSITY OF BRITISH COLUMBIA
RECEIVES FEDERAL GRANT TO STUDY
FIRE SAFETY CONTROLS IN HOSPITALS

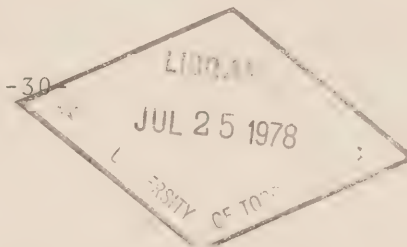
OTTAWA - The Honourable Ron Basford, Minister of Justice, today announced on behalf of Health and Welfare Minister, Monique Bégin, a contribution under the National Health Research and Development Program of \$219 850 to the University of British Columbia, to study the feasibility of new approaches to hospital fire safety.

Mr. Basford noted that the 30-month long study, which should be completed by the end of 1980, will have as its main purpose the development of an alternative statement of fire safety controls for hospitals. Through recognition of the on-going activities of health care, these controls should not obstruct such activities and, through the recognition of the role of hospital personnel in fire safety, might result in a reduction in hospital construction costs.

About 20 hospitals will be participating in the study. Consultation with provincial Fire Marshalls, building code groups, hospital associations and other interested parties will also take place within the study.

Ref: N.-René Mercier

Tel: (613) 995-8465



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news release

GOVERNMENT OF CANADA

1978 - 105

July 24, 1978

APPOINTMENT OF ASSISTANT DEPUTY MINISTER NEW HEALTH SERVICES AND PROMOTION BRANCH

OTTAWA - Health and Welfare Minister Monique Bégin today announced on behalf of the Public Service Commission that Dr. Maureen Law has been appointed Assistant Deputy Minister of the new Health Services and Promotion Branch.

Dr. Law graduated from Queen's University School of Medicine in 1964, and received her diploma in Public Health from the University of Toronto in 1967, as well as a Master's degree in Science (Health Care Organization) from the same university. She is a fellow of the Royal College of Physicians and Surgeons of Canada.

Dr. Law served as Deputy Medical Officer of Health in Newmarket, Ontario and subsequently as Assistant Professor in Community Health, Queen's University. She joined the Department of National Health and Welfare in 1973 as Director, Community Health Services Development. In 1976, she was appointed Director General, Health Consultants Directorate, Health Programs Branch and recently, Acting Assistant Deputy Minister of that Branch.



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2020/21 EVUWAT

1

The following table shows the results of the 2020/21 EVUWAT. The table is divided into two main sections: 'EVUWAT' and 'EVUWAT 2020/21'. The 'EVUWAT' section shows the results of the 2020/21 EVUWAT, and the 'EVUWAT 2020/21' section shows the results of the 2020/21 EVUWAT. The table is divided into two main sections: 'EVUWAT' and 'EVUWAT 2020/21'. The 'EVUWAT' section shows the results of the 2020/21 EVUWAT, and the 'EVUWAT 2020/21' section shows the results of the 2020/21 EVUWAT.

The new Branch to be headed by Dr. Law will encompass departmental responsibilities for the promotion of the health and well-being of Canadians and the prevention of illness and disability. It will also assist in the development and maintenance of appropriate health care services for all Canadians. The Health Services and Promotion Branch will include several units currently in existence in Health Programs, Health Protection and Social Services Programs Branches and will expand departmental thrust in the general field of promotion and prevention.

Ref.: N.-René Mercier

Tel.: (613) 995-8465

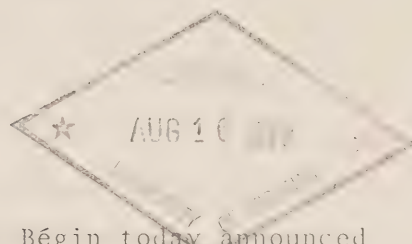


news release

Government
Publications

1978 - 108
August 10, 1978

FAMILY PLANNING FELLOWSHIP GRANT FOR UNIVERSITY OF GUELPH



OTTAWA - Health and Welfare Minister Monique Bégin today announced approval of a \$51 000 Family Planning Grant to the University of Guelph's Department of Family Studies.

The grant is for a fellowship program that will introduce new graduate courses in human sexuality and family planning. In addition, the grant will enable the Department of Family Studies to provide workshops for professionals actively engaged in the provision of family planning services and to conduct research on adolescents and contraception. A monograph of research findings from various disciplines concerning adolescents and birth control will be published as part of the fellowship program.

In applying for the grant, the University noted the critical absence of graduate level programs for family planning specialists and a lack of social scientific research, particularly on the growing problem of pregnancy among adolescents. The fellowship program will address these problems.

- 30 -

Ref.: A1 Hand
Tel.: (613) 995-8465



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news release

Government
Publication

1978 - 112

August 17, 1978

CANADIAN POSITION ON NITRITE IN CURED MEATS

OTTAWA - Health and Welfare Minister Monique Bégin today announced that additional restrictions on the use of nitrite in the curing of meats in Canada are not warranted at this time. The decision was reached following thorough evaluation of available information on the benefits and risks associated with nitrite.

Miss Bégin noted that it has been a long-term policy of her department to limit the use of nitrite and nitrate, a related chemical, to levels necessary to prevent formation of botulinus toxin in cured meat products. The department's long-term goal is to phase out the use of nitrite and nitrate if safe and effective substitutes become available. Thus, use of nitrite in curing fish products was prohibited in 1959. In 1975, almost all permitted uses of nitrate in curing of meats were stopped, the remaining uses of nitrate were restricted to a level of 200 parts per million, and the level of nitrite added in the curing of bacon was reduced to 150 parts per million and 200 parts per million in preparing other cured meat products. Regulations prohibiting the pre-mixing of nitrates and nitrite with other components of dry cures also were promulgated in 1975.

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Until recently, concern about nitrite focused on the possibility that it could combine with other chemicals in foods and in the body to produce substances called nitrosamines, which are potent cancer-producing agents. A recent U.S. study by Professor Paul Newberne of the Massachusetts Institute of Technology has suggested that nitrite itself may produce cancer when fed in high doses to rats. Officials of the Health Protection Branch (HPB) are fully aware of the Newberne study and have been in close consultation with Dr. Newberne and with health officials in the United States and United Kingdom. A detailed examination of the Newberne study and of all other published information bearing on the safety of nitrite is being undertaken by HPB scientists.

HPB has had active programs of investigation on the safety of nitrites underway for several years. In a recently-concluded long-term study conducted under contract for the Branch, rats were given diets that included 25 per cent cooked bacon made with or without nitrite throughout their lifespan. The incidence of cancer was unchanged in animals given the nitrite-cured bacon as compared to those receiving bacon without added nitrite. The results of this study provide added assurance on the safety of nitrite under practical conditions of use.

In considering appropriate action on nitrite, it must be kept in mind that its use is required to prevent growth in cured meats of Clostridium botulinum, a microorganism which

causes botulism, a serious and often deadly disease. Nitrite also retards the growth of spoilage microorganisms and imparts a characteristic flavor and color to cured meats. To date, no suitable substitute for nitrite has been found. Thus, it is necessary to balance the essential value of nitrite in preventing botulism against the theoretical possibility that it may produce cancer, either directly or through the formation of nitrosamines. At present, if nitrite were not used, bacon, ham and other cured meat products as we know them would not be available to the public. The cooking times and temperatures necessary to ensure bacterial safety of canned meat products such as luncheon meats made without nitrite would render these products esthetically undesirable. All remaining smoked meat products would require storage at refrigeration temperatures.

Since no safe and effective substitute for nitrite is available, elimination of its use at this time would expose consumers of processed meats to the very real risk of botulism and would deprive consumers of the characteristic flavor and color of cured meats such as bacon and ham. "On the basis of a benefit to risk assessment, I have concluded that the elimination of nitrite would not be warranted," Miss B  gin reiterated.

In carrying forward its long-term policy to reduce unnecessary use of nitrite, the HPB will continue to work closely with scientists in the Canadian meat industry and to closely monitor world experience with this substance. First priority

will be given to investigations to determine whether the level of nitrite added in the curing of bacon can further be reduced without endangering the safety and esthetic desirability of the product. Additional investigations on the safety of nitrite and of possible substitutes are being planned jointly with health officials of the United States and the United Kingdom.

Ref.: Michael Alexander

Tel.: (613) 996-0446



news release

Government
Publications

1978 - 116

August 29, 1978

NATIONAL WELFARE GRANTS

OTTAWA - A \$70 581 grant for a Nova Scotian study of the life conditions of the unmarried mother and her child is among 16 National Welfare Grants announced today by Health and Welfare Minister Monique Bégin. The grants total \$357 693.

Seventy-seven other National Welfare Grants, totalling \$3.5 million, have been renewed for another year.

The grants cover a wide range of demonstration and research projects and other activities in the social welfare field.

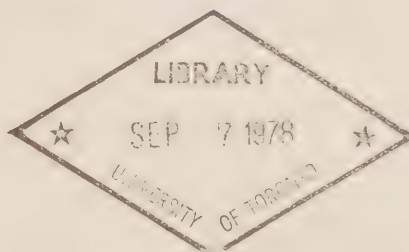
National Welfare Grants are designed to promote improvements and innovation in welfare services by providing financial assistance, consultation, information and advice to welfare agencies for short-term research, demonstration and other project activities.

Attached is a list of the approved grants.

- 30 -

Ref: A1 Hand

Tel: (613) 995-8465



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NEW PROJECTS

NATIONAL ORGANIZATIONS

Canadian Council for Exceptional Children - Winnipeg \$5000

A grant to host the 3rd National Congress of this international movement. Discussions will be focused on the deaf, the blind, the physically handicapped, the hearing disabled and the culturally different child.

Canadian Co-ordinating Council on Deafness - Ottawa 40 000

A grant to enable the Council to hire an organizational development director to develop and disseminate in-house materials and public information booklets.

Canadian Rehabilitation Council for the Disabled - Toronto 2500

A grant to enable disabled persons to meet representatives of industries which employ physically handicapped persons.

A grant to establish a manual retrieval card index system; to identify provincial and regional information system contacts and advise consumer groups of the scope of the information service in the field of rehabilitation. 29 000

A grant to enable six resource persons to participate in a national technical aids conference and to serve as consultants in the preparation of a resource manual. 4000

Canadian Association for Children With Learning Disabilities - Ottawa 43 757

A grant to develop a five-year program plan and prepare an evaluation mechanism which will assist the association in accomplishing its objectives.

Steering Committee of Family Services Canada - Ottawa 34 200

A grant to implement recommendations of last year's feasibility study on a national association of family services agencies.

Study of homemaker services - Canadian Council on Social Development, Ottawa 30 000

This grant will enable a study of homemaker services offered to the elderly, the handicapped and single-parent families. The project will check on the adequacy of such services through individual and group interviews with users, as well as simultaneously studying the commercial sector providing this type of service.

BRITISH COLUMBIA

Conference Committee (Association of Family Conciliation
Courts) - Vancouver

\$4725

A grant to help fund an international conference on the problems of families facing divorce or separation. The conference will be concerned with family law and human rights, domestic violence and issues pertaining to unified family courts in Canada.

Britannia Community Services Centre - Vancouver

22 850

A fellowship to permit the preparation of a case study on the Britannia Community Services Centre in contrast to the Community Services Centre Model.

ALBERTA

Calgary Board of Education - Calgary

12 100

A grant to enable the development of an evaluation study to determine the success rate of a new social service program for single parents on public assistance. This program entails counselling, information and support services towards helping these people to become independent from the welfare system.

MANITOBA

Planning Support Services, Department of Health and
Social Development of Manitoba - Winnipeg

9707

This project is concerned with the process by which mentally retarded persons are labelled mentally retarded -- specifically, who are the professionals and agencies who do the labelling, what are the criteria and methods they used, and what are the socio-economic, demographic, physical and behavioural characteristics of the groups that are labelled?

ONTARIO

Ashby House Group - Toronto

11 902

A grant to evaluate an approach for the social rehabilitation of young adults who have suffered brain damage secondary to head injury and to restore normal cognitive and social functioning.

QUEBEC

\$26 776

Assistance to Quebec Widows - Quebec

This project will include an information and referral centre, counselling services and seminars and meetings on the problems inherent to widowhood. The work of this project will be preventive education within the community.

Study of Punitive Practices of Quebec Parents - Quebec

10 595

This project will attempt to determine the punitive behaviour of Quebec parents according to the various areas of socialization of the child and the various types of parents. Punitive practices are to be divided into four overall divisions: physical punishment, verbal punishment; withdrawal of privileges or affection and the use of reason.

NOVA SCOTIA

Social Research and Planning, Department of Social Services of Nova Scotia - Halifax

70 581

A project to study in greater depth the life circumstances of the unmarried mother and her child. It will compare these circumstances to married mothers and also determine if there is a need for new support services for unmarried mothers.

RENEWED PROJECTS FOR 1978/79

NATIONAL PROJECTS

<u>The Canadian Council on Social Development - Ottawa</u> <u>Trends in Foster Care and Adoption of Children in</u> <u>Canada.</u>	\$6500
<u>Canadian Association of Social Workers - Ottawa</u> <u>Utilization of Social Welfare Manpower.</u>	47 435
<u>Canadian Association for the Mentally Retarded - Toronto</u> <u>Comprehensive Community Service (ComServ) Experimental</u> <u>and Demonstration Project: Cote Nord.</u>	94 000
<u>Canadian Association for the Mentally Retarded - Toronto</u> <u>Comprehensive Community Service (ComServ) Experimental</u> <u>and Demonstration Project: Lethbridge, Alberta.</u>	70 000
<u>Board of Directors, Canadian Journal and Digest of</u> <u>Poverty Law - Winnipeg</u> <u>Canadian Journal and Digest of Poverty Law.</u>	35 900
<u>Canadian Rehabilitation Council for the Disabled - Toronto</u> <u>14th World Congress of Rehabilitation International</u> <u>Canadian Rehabilitation Council for the Disabled.</u>	19 650
<u>Canadian Association for the Mentally Retarded - Toronto</u> <u>Family Resource Service Project.</u>	24 350
<u>Canadian Council on Social Development - Ottawa</u> <u>International Social Service Canada.</u>	41 000

BRITISH COLUMBIA

<u>School of Social Work, University of British Columbia -</u> <u>Vancouver</u> <u>A Study of the Helping Process in Social Work Practice.</u>	8900
<u>United Way of Greater Vancouver - Vancouver</u> <u>Follow-up to Symposium on Family Violence.</u>	18 935
<u>The United Way of Greater Vancouver - Vancouver</u> <u>Research Group Development Grant.</u>	49 823
<u>School of Social Work and Division of Continuing Education,</u> <u>University of Victoria - Victoria</u> <u>Development of Instructional Materials Relating to Social</u> <u>Change and Intervention in Non-urban Communities.</u>	43 200
<u>Social Planning and Review Council (Sparc of British</u> <u>Columbia) - Vancouver</u> <u>Community Education and Citizen Training Knowledge and</u> <u>Skill Development.</u>	73 744

<u>British Columbia Association of Social Workers - YM-YWCA - Victoria</u>	\$99 622
<u>Prime Time: A project for Women in Their Middle Years.</u>	

<u>Childrens Hospital - Vancouver</u>	82 241
<u>Counselling and Home Training for Deaf Children and Their Families.</u>	

<u>Ad Hoc Planning Committee for a Family Training Centre - Vancouver</u>	7400
<u>Design Study to Investigate the Need, Feasibility and Optimal Form of a Family Therapy Training Centre.</u>	

ALBERTA

<u>Special Programs and Resources for Kids (SPARK) - Canmore</u>	88 194
<u>Bow Corridor Total Life Program.</u>	

<u>Department of Psychology, University of Calgary - Calgary</u>	16 328
<u>Mentally Handicapped: A Canonical Model of Total Benefits Assessment.</u>	

<u>Department of Recreation Administration, University of Alberta - Edmonton</u>	12 181
<u>The Origins of the Preventive Social Program in Alberta.</u>	

<u>The Vocational and Rehabilitation Research Institute - Calgary</u>	6600
<u>The Benefits and Costs of Rehabilitation at the V.R.R.I. and Post Phase I Analysis of V.R.R.I. Rehabilitation Research Data.</u>	

<u>Faculty of Social Welfare, University of Calgary - Calgary</u>	3811
<u>An Exploratory Study of Adjustment to Pre-Operative Stress and Post-Operative Social Rehabilitation of Cardiovascular Surgery Patients.</u>	

<u>Faculty of Social Welfare, University of Calgary - Calgary</u>	55 125
<u>PhD Program Planning Project.</u>	

SASKATCHEWAN

<u>Lorh Co-operative Industries - Tisdale</u>	10 000
<u>Innovative Project for Handicapped Adults.</u>	

<u>Faculty of Social Work, University of Regina - Regina</u>	11 125
<u>Effects of Fiscal Restraint Upon the Personal Social Services in the Province of Saskatchewan.</u>	

<u>Sample Survey and Data Bank Unit, University of Regina - Regina</u>	750
<u>Feasibility Study of the Evaluation of the Family Income Plan -- Saskatchewan.</u>	

<u>Faculty of Social Work, University of Regina - Regina</u> <u>Visiting Professorship.</u>	\$4640
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MANITOBA

<u>School of Social Work, University of Manitoba - Winnipeg</u> <u>Demonstration of the Effect of Social Work Skills in</u> <u>Industry.</u>	78 374
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<u>School of Social Work, University of Manitoba - Winnipeg</u> <u>Program Accessibility Project.</u>	27 033
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ONTARIO

<u>School of Social Work, Carleton University - Ottawa</u> <u>Select Bibliography on Canadian Social Welfare Policy.</u>	28 600
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<u>Social Planning Council of Metropolitan Toronto - Toronto</u> <u>Research Group Development Grant.</u>	46 914
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<u>Toronto Child Parent Development Centre - Toronto</u> <u>Children's Storefront.</u>	20 000
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<u>Toronto Christian Resource Centre - Toronto</u> <u>Rooming House Tenant Project.</u>	69 994
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<u>School of Social Work, Carleton University - Ottawa</u> <u>Isolated Nuclear Family - Fact or Fiction? A Comparative</u> <u>Study of the Patterns of Mutual Aid Between Canadian</u> <u>Working Class and Middle Class Families and Their Respective</u> <u>Social Networks.</u>	1750
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<u>Department of Family Studies, University of Guelph -</u> <u>Guelph</u> <u>Experimental Analysis of the Impact of an Early Childhood</u> <u>Consultant on Family Day Care Providers.</u>	6147
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<u>Family Service Association of Metropolitan Toronto -</u> <u>Toronto</u> <u>Marital Separation Counselling and the Uncoupling Process.</u>	84 494
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<u>The Childrens Aid Society of Hamilton Wentworth - Hamilton</u> <u>A Secondary Analysis of the Foster Care for Adolescents</u> <u>Survey.</u>	19 232
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<u>Department of Psychiatry, McMaster University - Hamilton</u> <u>Canadian Resource Centre for Program Evaluation Materials.</u>	17 732
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<u>Durham Child Abuse Committee - Oshawa</u> <u>CASED - Child Abuse Services Education Development Project.</u>	38 835
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<u>Parent Preschool Resource Centre - Ottawa</u> <u>Parent Preschool Resource Centre.</u>	3500
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<u>Frontenac Family Referral Service - Kingston</u>	\$50 604
<u>Provincial Court Family Division.</u>	

<u>Provincial Court (Family Division) Conciliation and Research Projects - Toronto</u>	102 492
<u>Conciliation Project, Provincial Court (Family Division)</u>	

<u>The Ottawa-Hull Rape Crisis Centre - Ottawa</u>	110 991
<u>The Ottawa-Hull Rape Crisis Centre Project</u>	

<u>The Children's Aid Society of Metropolitan - Toronto</u>	83 400
<u>Treatment Resource for Emotionally Deprived and/or Physically Abused Toddlers - T.R.E.A.T.</u>	

<u>Teen Family Program Limited - Thunder Bay</u>	68 440
<u>Teen Family Program</u>	

<u>Blissymbolics Communication Foundation - Toronto</u>	22 400
<u>Establishment of a Liaison Service Between the Blissymbolics Foundation and Social Agencies Serving Non-Speaking Members of the Community.</u>	

<u>School of Social Work, University of Windsor - Windsor</u>	9085
<u>A Design Project to Investigate the Potential of Computer-Assisted Instruction for Increasing the Research Capacity of Social Workers.</u>	

<u>School of Social Work, Carleton University - Ottawa</u>	8931
<u>Visiting Professorship</u>	

<u>Child and Family Centre Kitchener-Waterloo Hospital - Kitchener</u>	20 035
<u>Proposal for the Development of Psychometric Characteristics of the D.I.S.C. (Developmental Inventory Scale of Children).</u>	

<u>Department of Social Work, York University - Downsview</u>	18 000
<u>Perceptions of Discrimination of East and West Indian Immigrants Related to Utilization of Community Services in Metropolitan Toronto.</u>	

QUEBEC

<u>West Island Adaptation Services Inc.- Lachine</u>	160 000
<u>Training in Independent Living.</u>	

<u>Groupe de ressources techniques en habitation de Montréal Inc.</u>	
<u>Consolidation of the technical resources group on accomodation.</u>	126 251

<u>Liaison commitee - Grandes Bergeronnes</u>	135 000
<u>Project Contract</u>	

<u>Corporation Foyer de Mariebourg - Montreal</u> <u>Mariebourg Centre</u>	\$50 000
<u>Catholic Community Services (F.C.C.S.) Inc. - Montreal</u> <u>Healthy family assessment project.</u>	11 900
<u>Social Gerontology Laboratory, Laval University -</u> <u>Quebec City</u>	68 125
<u>Research Group Development Grant.</u>	
<u>Metropolitan Montreal Social Service Centre - Montreal</u> <u>The impoverishment of the low wage earner</u>	3925
<u>Social Gerontology Laboratory, Laval University -</u> <u>Quebec City</u>	3500
<u>Research Project - Establishment of a battery of indicators</u> <u>for group accomodation in Quebec</u>	
<u>Laboratory on Income Distribution and Security,</u> <u>University of Quebec at Montreal- Montreal</u>	8400
<u>Income security in North America and in Europe.</u>	
<u>School of Social Work, McGill University - Montreal</u> <u>Help seeking behavior of workers.</u>	13 595
<u>Research Group on Juvenile delinquency - Montreal</u> <u>Evaluation of Boscoville.</u>	36 516
<u>Community Psychiatric Centre, Verdun</u> <u>Interaction of Community Psychiatric Centre patients</u> <u>with people in their usual environment.</u>	45 375
<u>Agricultural and Forestry Organization Committee -</u> <u>Lac St-Jean</u>	33 831
<u>Osmosis</u>	
<u>NEW BRUNSWICK</u>	
<u>Social Service Department, University of Moncton -</u> <u>Moncton</u>	67 000
<u>Decentralized delivery of social work education in the</u> <u>Maritime Provinces.</u>	
<u>Natural Recovery System Inc. - Moncton</u> <u>The development and implementation of a life skills</u> <u>Programme for developmentally handicapped adults employed</u> <u>at N.R.S. Inc. and in the community of Moncton.</u>	69 329
<u>Les producteurs d'arbres de Noël de Claire-Fontaine Ltée -</u> <u>Saint-Louis de Kent</u>	30 000
<u>Les producteurs d'arbres de Noël de Claire-Fontaine.</u>	

<u>Department of Social Services - Fredericton</u> <u>Teaching Homemaker Service.</u>	\$76 000
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PRINCE EDWARD ISLAND

<u>Occupational Therapy Services Planning Committee</u> <u>Department of Social Services - Charlottetown</u>	71 411
<u>An Integrated Community Program Using Occupational Therapy.</u>	

NOVA SCOTIA

<u>Institute of Public Affairs, Dalhousie University -</u> <u>Halifax</u>	61 563
<u>Research Group Development Grant.</u>	

<u>Maritime School of Social Work, Dalhousie University -</u> <u>Halifax</u>	135 000
<u>The Social Services Manpower System in Atlantic Canada.</u>	

<u>Institute of Public Affairs, Dalhousie University -</u> <u>Halifax</u>	23 600
<u>Public Policy Formation and the Marginal Work World</u> <u>in the Atlantic Provinces.</u>	

<u>St. Francis Xavier University, Extension Department -</u> <u>Antigonish</u>	45 500
<u>Community Development Project for Rear Monastery,</u> <u>Upper Big Tracadie, Lincolnville and Sunnyville.</u>	

<u>New Dawn Enterprises Limited - Sydney</u>	130 000
<u>New Dawn Enterprises Ltd.</u>	

<u>Children's Aid Society of Colchester County - Truro</u>	83 221
<u>Colchester Human Resource Development Project.</u>	

NEWFOUNDLAND

<u>Community Services Council - St. John's</u>	70 000
<u>Community Services Council.</u>	

NORTHWEST TERRITORIES

<u>Pairivik Day Care Centre - Frobisher Bay</u>	34 287
<u>The Bi-cultural English Inuktitut Program for the</u> <u>Pairivik Day Care Centre.</u>	

<u>Mothers and Tots Drop-in Centre, Old City Hall -</u> <u>Yellowknife</u>	18 170
<u>Mothers and Tots Drop-in Centre.</u>	

YUKON TERRITORY

<u>Watson Lake Area Productive Youth - Watson Lake</u>	50 140
<u>Watson Lake Area Productive Youth Project.</u>	



news release

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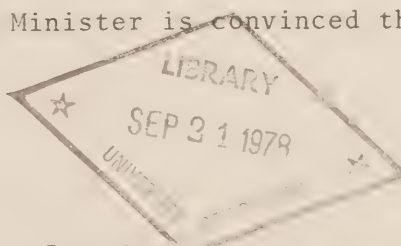
September 5, 1978

CANADIAN COMMISSION FOR INTERNATIONAL YEAR OF THE CHILD APPOINTED

OTTAWA - Health and Welfare Minister Monique Bégin today announced the formation of the Canadian Commission for the International Year of the Child. The Minister also announced that Judge Doris Ogilvie of Fredericton, New Brunswick will chair the Commission which will hold its first meeting September 7-8, 1978 in Ottawa.

The Commission is composed of more than 40 representatives of the federal and provincial governments, business and labour, voluntary organizations and individuals dedicated to improving the quality of childhood and family life. Details of the Commission's composition will be announced at the September meeting. The Commission's function is to promote the observance in Canada of 1979 as the International Year of the Child.

The Minister views the International Year of the Child as an opportunity for all Canadians to join in a celebration of childhood and to do all in our power to make Canada and the world a better place for children. A society that truly cares for its children will thrive and the Minister is convinced that Canadians really care.



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Canada

The Commission will administer a federal contribution of \$1 000 000 to the private and voluntary sectors for projects, as well as endeavor to raise additional public and private funds. Funds will be used for projects and activities designed to advance the rights, interests and well being of children in the context of their families and society.

In announcing the appointment of the chairperson, Miss Bégin noted that Judge Ogilvie is an outstanding Canadian whose active concern for and interest in children and families has been well demonstrated. Born in Halifax, Nova Scotia, Doris Ogilvie was admitted to the Bar of the Province of New Brunswick in 1964. She was a member of the Royal Commission on the Status of Women in Canada. She is Deputy Judge of Provincial Court and Deputy Judge of Juvenile Court, County of York, New Brunswick. She is married to Dr. Robert Ogilvie and they have four daughters.

Miss Bégin said she was deeply grateful to Doris Ogilvie and the other members of the Commission who are voluntarily devoting their time and talents to making 1979, the International Year of the Child, a constructive and rewarding experience for children, their parents and for all Canadians.

Ref.: A1 Hand

Tel.: (613) 995-8465



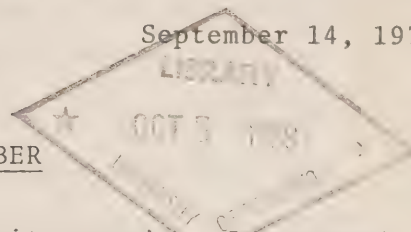
news release

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September 14, 1978

OLD AGE SECURITY PAYMENTS RISE IN OCTOBER



OTTAWA - Increases in the Old Age Security pension, Guaranteed Income Supplement and Spouse's Allowance, effective in October, 1978, were announced today by Health and Welfare Minister Monique Bégin.

Increases in Old Age Security pension and Guaranteed Income Supplement payments represent the twentieth quarterly escalation based on the cost of living, as provided for in the Old Age Security Act since October, 1973.

The new monthly total at the single rate for persons receiving both the basic Old Age Security pension and maximum Guaranteed Income Supplement will be \$280.29.

For a married couple, both pensioners, the combination of the basic pension and maximum supplement will provide a monthly payment of \$534.70 for the couple.

The basic Old Age Security pension will rise in October to \$164.74 from the present \$159.79.

The Guaranteed Income Supplement is paid to pensioners whose income, apart from the Old Age Security pension, is limited. The amount of the supplement varies in relation to the amount of income.



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The maximum Guaranteed Income Supplement for a single person, or a married person whose spouse is not a pensioner and is not receiving a Spouse's Allowance, will go up in October to \$115.55 from its current \$112.08. The maximum supplement for a married couple, both pensioners, will increase to \$102.61 each from \$99.52. Added to the basic pension, this will give each married pensioner \$267.35 monthly, or a total of \$534.70 for the couple.

The Spouse's Allowance is paid to persons between 60 and 65 years of age who are married to Old Age Security pensioners and meet residence requirements. Entitlement to a Spouse's Allowance, and amount paid, is based on yearly income.

The maximum Spouse's Allowance will increase to \$267.35 from \$259.31. The maximum Spouse's Allowance is made up of an amount equivalent to the basic Old Age Security pension and the maximum Guaranteed Income Supplement at the married rate.

Ref.: Al Hand

Tel.: (613) 995-8465



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November 16, 1978

NATIONAL WELFARE GRANTS

OTTAWA - A \$60 000 grant for a study into the legal support obligations after the breakdown of a marriage has been awarded to the Institute of Law Research and Reform of Alberta and the Alberta Department of Social Services and Community Health. It is among 13 National Welfare Grants announced today by Health and Welfare Minister Monique Bégin. The grants total \$310 301.

Two other National Welfare Grants, totalling \$6030, have been renewed for another year.

The grants cover a wide range of demonstration and research projects and other activities in the social welfare field.

National Welfare Grants are designed to promote improvements and innovation in welfare services by providing financial assistance, consultation, information and advice to welfare agencies for short-term research, demonstration and other project activities.

Attached is a list of the approved grants.

- 30 -

Ref.: N.-René Mercier

Tel.: (613) 995-8465 (office)

(819) 827-0877 (home)



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NEW PROJECTS

NATIONAL ORGANIZATIONS

Canadian Association of Schools of Social Work
Ottawa

A grant to promote teaching material information exchange among advanced level research instructors in schools of social work. \$9774

A project to enable the translation into French of Dr. Lawrence Shulman's report entitled "A Study of the Helping Process." 11 000

BRITISH COLUMBIA

School of Social Work - University of British
Columbia - Vancouver 2000

The project will identify the nature of tasks performed by various types of indirect service practitioners in social welfare and also explore the implications of these findings for social work training.

ALBERTA

Institute of Law Research and Reform of Alberta
and the Provincial Department of Social Services
and Community Health - Edmonton 60 000

A grant to investigate the relationship between meeting/not meeting support obligations after the breakdown of a marriage, the social and motivational characteristics of the spouses as well as the characteristics of the original maintenance order awards and of subsequent adjustment/awards.

Faculty of Social Welfare, University of Calgary - Calgary 6000

A grant to assist the holding of a national symposium on social impact assessment. The symposium will examine the approaches involved in determining the needs for social impact studies, their terms of reference, how such studies are conducted and how they are integrated into the decision-making process.

SASKATCHEWAN

Rural Social Work Forum, Faculty of Social Work, \$3000
Community Education Centre - Regina

The Rural Social Work Forum will produce proceedings of the workshop held in Waterloo May 26 - 28, including plans for the future of the rural social work forum, development of programs for social work practice, and additions to the resources included in the previous document.

MANITOBA

Planning Support Services - Department of Health 8280
and Social Development - Winnipeg

A grant to analyze data on the performance of mentally ill and mentally retarded persons living in community residential facilities in Manitoba.

ONTARIO

Hotel Dieu Hospital - Kingston 76 450

A grant to deploy social workers in primary care counselling in order to describe the nature of the social work role in primary care, assess the impact on community, social and health services, and compare costs and effectiveness of social work and family physician treatment of a selected number of psycho-social problems.

Carleton University, School of Social Work - Ottawa 2577

A grant to enable the University to develop a manuscript of the Conference of the Social Policy proceedings including transcribing from videotapes, typing of the manuscript, printing 300 copies of the proceedings for national distribution and to develop a videotape record of major presentations.

Catholic Social Services - London 9070

A grant to develop a plan to monitor the implementation of multi-service centres in semi-rural areas and also describe the developmental processes involved in setting up these types of centres.

QUEBEC

Centre d'étude de l'épilepsie, Hôpital Notre-Dame - Montréal \$26 000

A grant to identify accessible resources available to epileptics and increase the efficiency of those resources through the creation of an association.

Comité organisateur canadien de l'Association internationale des magistrats de la jeunesse - Montréal 5000

A grant to enable the Committee to meet expenses incurred during the 10th congress of l'Association internationale des magistrats de la jeunesse which was held in Montreal July 17 to 22, 1978, dealing mainly with the problem of battered children.

NOVA SCOTIA

Social Planning Department - Halifax 91 150

A grant to demonstrate a positive social and economic alternative to welfare. It will show how social assistance dollars can be used, in combination with other fiscal and human resources to move more individuals from dependance on municipal social assistance to increased self-dependence through stable employment.

RENEWED PROJECTS FOR 1978/79

ONTARIO

School of Social Work, McMaster University - Hamilton 650
For a national conference on social services and the work setting.

QUEBEC

Centre for Human Relations and Community Studies - Montreal 5380

For a study of systems improvement research in the administration, service delivery, and policy planning of four community serving organizations.



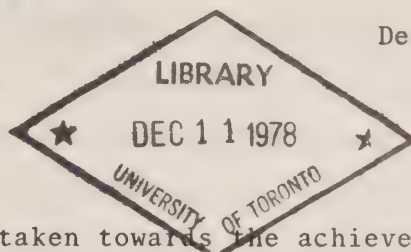
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from the office of the minister of national health and welfare
the Honourable Monique Bégin

Government
Publications

1978 - 141

December 1, 1978



GREATER STABILITY
FOR BIOMEDICAL RESEARCH

OTTAWA - A major step has been taken towards the achievement of greater stability in the federal government's support of biomedical research, according to a statement issued today by the Honourable Monique Bégin, Minister of National Health and Welfare.

Cabinet has endorsed a rationale for the Medical Research Council (MRC) based on the support of university research through a variety of programs designed to achieve a balance between basic, clinical and developmental research in the health field. The main criterion for approval of proposals continues to be excellence as assessed by peers.

In what amounts almost to a landmark decision, Cabinet has also accepted the concept of a formula for establishing the annual expenditure level for MRC for the years 1978 to 1983. Acceptance of the formula does not preclude consideration by the government of additional funding for research in areas of national concern or consideration of the most appropriate indices for cost increases.

These decisions by the government represent a major victory for the MRC, the scientific community and the public at large who have pressed for a budgetary formula which would enable the



MRC to work towards its long-term objectives in a planned and orderly manner.

The present budget of the Medical Research Council, the main agency for federal support of biomedical research, is \$63 002 000. The level for future years will be determined by applying the appropriate index for cost increases (now, according to government guidelines, the Implicit Price Index) plus the percentage of real growth of the Gross National Product less one per cent.

Application of the guidelines, as approved by Cabinet, would mean an allocation of \$68.8 million for the Medical Research Council in the fiscal year 1979-80.

"I am delighted," said Bégin, "that after extensive study of alternatives a formula has been adopted which will assure the maintenance of high quality health research in Canadian universities and hospitals and, at the same time, makes provision for special effort in areas of national concern. The Medical Research Council has played a major part in developing a cadre of excellent health scientists of whom the country can be proud and I am confident that this added financial stability will serve to increase their effectiveness, both in advancing our knowledge and in applying that knowledge to the care and cure of the sick."

- 30 -

Ref.: Dr. J.M. Roxburgh

Tel.: (613) 996-8172

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news release

Govt.
Publication

1978 - 147

December 14, 1978

MONIQUE BÉGIN SUPPORTS MORE FLEXIBILITY IN RETIREMENT AGE

OTTAWA - Too little income is the most important problem facing the elderly in Canada, according to a brief presented today to the Special Senate Committee on Retirement Age Policies by Health and Welfare Minister Monique Bégin. In her brief, Miss Bégin expressed strong support for more flexibility in retirement age, both before and after 65 years of age, but noted that only if the pension system is improved can a majority of Canadians come to have control over their retirement decisions.

The Minister produced distressing statistics: half of Canadian pensioners have incomes below the poverty line; in 1978, 54 per cent of all pensioners were poor enough to be receiving Guaranteed Income Supplement payments; and moreover, 19 per cent were totally dependent upon Old Age Security and Guaranteed Income Supplement benefits.

Miss Bégin blamed the elderly's lack of income primarily on the failure of employer-sponsored pensions to produce adequate retirement income. She mentioned incomplete coverage, inadequate portability and vesting arrangements, lack of survivor benefits and the failure to index pensions as the most serious problems.



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Women are particularly badly treated: they are less likely than men to belong to a job-related pension plan and few of those who do are likely to qualify for significant retirement benefits; the most recent statistics show that only 45 per cent of private plan members belonged to plans which paid a widow's pension and a widow's benefits amounted to only 50 per cent of her husband's pension in most cases. As a result, more than two-thirds of unmarried women over 65 years of age (over 400 000) had a total income of less than \$3 500 in 1975.

According to the Minister, while low income is the primary problem, there are good reasons to proceed with relaxing the current rigid mandatory retirement age practices. This would allow those above age 65 to have greater opportunity to balance work and leisure. Many senior citizens have the capability and the desire to continue to make an economic contribution to society, and they should not be denied the right to do so. Not only would those who continue working reduce their likelihood of becoming socially isolated, but they would also improve their income situation. A relaxation of mandatory retirement age practices should not be seen, however, as an easy way to reduce pension costs; the basic objective must be an improved retirement income system.

Miss Bégin noted that shortcomings in employer-sponsored pensions prevent many workers from retiring early with an adequate pension. Those who are forced out of the labour force by ill health or lay-off are the most adversely affected. While recommending increased flexibility to accommodate those who need to retire early, she cautioned against undue financial incentives for early retirement, as such incentives could lead to major labour force shortages and higher pension costs.

The Minister stated that a general lowering of the age of entitlement in the public old age pension programs, even on an income-tested basis, could be prohibitively expensive, particularly during periods of restraint. According to the brief, one long-run solution, for those who need to retire early for health or occupational reasons, might be an expansion of insurance provisions.

The Minister also spoke favourably of initiatives which have been taken in Sweden and Norway to allow workers to phase into retirement gradually, rather than having to go through an abrupt cessation of employment as is done in North America.

The brief submitted by Miss Bégin recommended:

1. That in order to ensure a larger proportion of the work force receive job-related pensions, steps be taken to improve dramatically portability and vesting arrangements in employer-sponsored pension plans, if necessary by changing the regulations applicable to plans under federal jurisdiction;
2. That all benefits, including deferred pensions, from employer-sponsored pensions plans be indexed, in an appropriate manner, to counter the ravages of inflation;
3. That greater flexibility be provided to Canadians in choosing their retirement ages, whether before or after 65, and in particular the rigidities embedded in the current mandatory retirement age practices should be relaxed;
4. That survivors' benefits be improved, and that serious consideration be given to making joint and survivors' pensions mandatory in all employer-sponsored pension plans, in order to ensure that widows do not sustain a significant drop in living standards.

Ref.: N.-René Mercier
Tel.: (613) 995-8465 (Office)
(819) 827-0877 (Home)

Note: Copies of the brief are available on request from the Department of National Health and Welfare.

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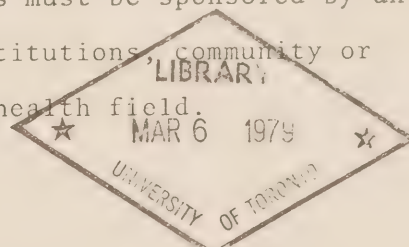
February 20, 1979

SUMMER RESOURCES FUND TO EMPLOY 265 STUDENTS

OTTAWA - Health and Welfare Minister Monique Bégin today announced that \$780 000 has been made available through her department's Promotion and Prevention Directorate to provide summer employment for approximately 265 students. The program, called the Summer Resources Fund, is part of the federal government's Canada Summer Youth Employment Program.

The students will be primarily involved in meaningful work and learning experiences in the field of substance (alcohol, tobacco and drugs) use and abuse. They will also work in areas relevant to individuals and organizations interested in the area of non-medical drug use and abuse which deal with priorities established by the Promotion and Prevention Directorate.

The Summer Resources Fund is an indirect employment program focusing on community service and development of knowledge projects. Project submissions may be initiated by students or by organizations. However, all projects must be sponsored by an agency or organization such as academic institutions, community or provincial agencies involved in the health field.



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Interested students can obtain information and project applications from Promotion and Prevention Directorate regional offices in Halifax, Montreal, Toronto, Winnipeg and Vancouver, or from universities, community colleges, interested agencies and private associations which have already received the information brochure, "Summer Resources Fund 1979".

Students or agencies wishing to hire students to carry out projects should use this guide in preparing their proposals. Applications for funding should be made by March 15, 1979. All hiring must be done through Canada Employment Centres where interested students should register.

- 30 -

Note: A list of regional offices of the Promotion and Prevention Directorate is attached.

Ref.: Michael Alexander

Jennifer Whitfield

Tel.: (613) 995-8465 (office)

(613) 995-6386 (office)

(613) 235-3664 (home)

PROMOTION AND PREVENTION DIRECTORATE REGIONAL OFFICES

Atlantic Region (Newfoundland, Prince
Edward Island, Nova Scotia, and
New Brunswick)

Summer Program Coordinator
Promotion and Prevention Directorate
Health and Welfare Canada
Roy Power Building
5409 Rainnie Drive
Halifax, Nova Scotia
B3J 1P8
Tel.: (902) 426-2700

Prairie Region (Manitoba and
Saskatchewan)

Promotion and Prevention Directorate
Health and Welfare Canada
Montreal Trust Building
603 - 213 Notre Dame Avenue
Winnipeg, Manitoba
R3B 1N3
Tel.: (204) 949-2554

Québec Region

Summer Program Coordinator
Promotion and Prevention Directorate
Health and Welfare Canada
450 St. Joseph Boulevard, East
Montreal, Québec
H3B 3A9
Tel.: (514) 283-4587

Western Region (Alberta and
British Columbia)

Summer Program Coordinator
Promotion and Prevention Directorate
Health and Welfare Canada
Suite 202
560 West Broadway Avenue
Vancouver, British Columbia
V6J 1X6
Tel.: (604) 666-6061

Ontario Region

Summer Program Coordinator
Promotion and Prevention Directorate
Health and Welfare Canada
10th Floor
Suite 1004
102 Bloor Street West
Toronto, Ontario
M5S 1M8
Tel.: (416) 966-6483

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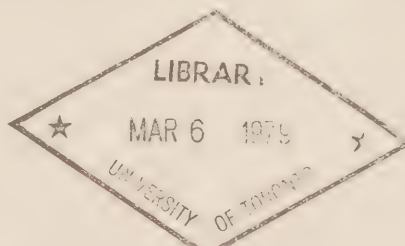
February 20, 1979

HEALTH ACTIVITIES SUMMER EMPLOYMENT PROGRAM FOR STUDENTS

OTTAWA - Health and Welfare Minister Monique Bégin today announced details on the department's Health Activities Summer Employment Program for Students (HASEPS). The \$920 000 program, to be administered by the department's Health Services and Promotion Branch, will enable voluntary health agencies, non-profit health-related organizations or other voluntary groups interested in administering short-term summer health projects to hire approximately 400 students across Canada. Allocation of funds and student positions are based on regional unemployment and population figures.

As part of the federal government's Canada Summer Youth Employment Program, HASEPS will provide the organizations with the necessary funds to hire post-secondary level students to work on short-term summer projects. The 400 jobs created by the program will provide up to 15 weeks of work for each student.

Students interested in participating in a health project should apply directly to the local Canada Employment Centres for further information.



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Voluntary health agencies, non-profit health-related organizations or other voluntary groups should submit their applications to HASEPS, Health Services and Promotion Branch, Department of National Health and Welfare, Room 663, Jeanne Mance Building, Ottawa, Ontario, K1A 1B4, before February 28, 1979. The organizations which have their applications approved will be required to contact Canada Employment or Canada Employment Centres for Students to obtain candidates for projects.

The main objectives of the Health Activities Summer Employment Program for Students are:

1. Providing post-secondary students with a positive summer work experience in the health field; and
2. assisting voluntary health agencies, non-profit health-related organizations or other voluntary groups with activities directed to improvement in the health of Canadians.

Ref.: Michael Alexander

Tel.: (613) 995-8465 (Office)

(613) 235-3664 (Home)

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news release

1979 - 56

May 25, 1979

WORLD HEALTH ORGANIZATION FELLOWSHIPS

OTTAWA - The Department of National Health and Welfare, on behalf of the World Health Organization (WHO), today announced the annual competition for fellowships for Canadian citizens wishing to study abroad for two or three months.

All Canadians working as professionals in health care delivery or health education are eligible to apply for these WHO fellowships, with the exception of those engaged in pure research, undergraduate and graduate university students and persons over 55 years of age.

Applicants will be rated by a selection committee on the basis of education, experience, field of activity, proposed area of study and the intended use of their newly-acquired knowledge. Responsibility for final selection of fellowship recipients will rest with the WHO.

Applicants should submit their applications before August 31, 1979. Application forms can be obtained by writing to:

WHO Fellowships
Intergovernmental and International Affairs Branch
Department of National Health and Welfare
Brooke Claxton Building, Tunney's Pasture
Ottawa, Ontario
K1A 0K9

- 30 -

Ref: A1 Hand

Tel: (613) 995-8465 (office)
(613) 729-0932 (home)



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1979 - 73

August 9, 1979

NATIONAL WELFARE GRANTS RENEWED

OTTAWA - Health and Welfare Minister David Crombie announced today that 61 National Welfare Grants, totalling \$2 759 805 have been renewed for another year.

The grants cover a wide range of demonstration and research projects and other activities in the social welfare field.

National Welfare Grants are designed to promote improvements and innovation in welfare services by providing financial assistance, consultation, information and advice to welfare agencies for short-term research, demonstration and other project activities.

Attached is a list of the approved grants.

- 30 -

Ref: A1 Hand:

Tel: (613) 995-8465



RENEWED PROJECTS FOR 1979-80

NATIONAL ORGANIZATIONS

The Canadian Council on Social Development
Ottawa

International Social Service Canada \$59 430

Canadian Association for the Mentally Retarded
Toronto

Comprehensive Community Service (Com Serv)
Experimental and Demonstration Project: Côte Nord 76 000

Canadian Association for the Mentally Retarded
Toronto

Comprehensive Community Service (Com Serv)
Experimental and Demonstration Project:
Lethbridge Alberta 70 000

Canadian Association of Social Workers
Ottawa

Utilization of Social Welfare Manpower 20 275

Board of Directors, POVCAN Incorporated
Winnipeg

Canadian Journal and Digest of Poverty Law 27 300

Steering Committee - Family Services Canada
Ottawa

Developmental Model for a National Organization of
Family Service Agencies in Canada 18 845

Mouvement Couple et Famille (M.C.F.) Inc.
Montréal

Nineteenth National Congress of the Mouvement Couple
et Famille (M.C.F.) Inc. 6 000

Canadian Rehabilitation Council for the Disabled
Toronto

Information Services System for the Physically
Disabled - Stage III 33 500

Comité canadien de l'Union internationale des
organismes familiaux - Montréal

Committee to regroup Canadian members of the Union and
favour their participation at the international level 8 000

YUKON TERRITORY

Watson Lake Productive Youth Project -
Watson Lake

Watson Lake Productive Youth Project \$56 932

NORTHWEST TERRITORIES

Mothers and Tots Drop In Centre
Yellowknife

Mothers and Tots Drop In Centre 21 000

BRITISH COLUMBIA

Lower Mainland Parent and Child Therapy Society
Vancouver

Residential Treatment Centre for Abusive Families 125 159

University of British Columbia - School of Social Work
Vancouver

Indirect Social Welfare Practice and Implications
for Social Work Education 3 000

PRIME TIME - Victoria

Prime Time - A Project for Women in Their Middle Years 108 408

University of Victoria - School of Social Work -
Division of Continuing Education - Victoria

Development of Resource Materials Relating to Social
Change and Intervention in Non-Urban Communities 12 690

United Way of the Lower Mainland
Vancouver

Research Group Development Grant 36 447

Children's Hospital - Vancouver

Counselling and Home Training Program for Deaf Children
and Their Families 97 455

ALBERTA

University of Calgary - Faculty of Social Welfare Calgary

Calgary Ph.D. Program Planning Project 17 850

University of Alberta - Department of Recreation and Administration - Edmonton

The Origins and Development of Alberta's Preventive
Social Service Program - Goal Effectiveness 17 497

The Vocational and Rehabilitation Research Institute Calgary

Publication of Pre-Vocational Programs 4 000

The Vocational and Rehabilitation Research Institute Calgary

An Evaluation of the Programmes for Several Agencies
Habilitating the Developmentally Handicapped Young Adult 15 000

Special Programs and Resources for Kids Banff

Bow Corridor Total Life Program 88 480

University of Calgary - Department of Psychology Calgary

Rehabilitation Program Accountability for the Adult
Mentally Handicapped: A Canonical Model of Total
Benefits Assessment 3 000

MANITOBA

Department of Health and Community Services, Planning Support Services - Winnipeg

Adaptive Functioning Level of Residents and Environmental
Quality in Community Residential Facilities for the
Mentally Ill and Mentally Retarded 6 000

Department of Health and Community Services, Planning Support Services - Winnipeg

The Prevalence of Mental Retardation - Who Labels
Whom and How and What are the Implications for Service
Delivery 1 500

University of Manitoba - School of Social Work
Winnipeg

A Demonstration of the Effect of Social Work Skills
in Industry \$110 852

ONTARIO

Carleton University - Centre for Social Welfare Studies,
School of Social Work - Ottawa

Bibliography on Canadian Social Welfare Policy 4 000

Social Planning Council of Metropolitan Toronto
Toronto

Phasing-Out of the Research Group Development Grant 37 092

The Children's Aid Society of Metropolitan Toronto
Scarborough

Treatment Resource for Emotionally Deprived and/or
Physically Abused Toddlers - T.R.E.A.T. 21 770

Teen Family Program Incorporated
Thunder Bay

Teen Family Program 71 100

Toronto Christian Resource Centre
Toronto

Rooming House Tenant Project 41 878

Ashby House Group - Toronto

Research Study on Brain Damaged Young Adults 12 280

Frontenac Family Referral Service
Kingston

Domestic Disturbance Program 19 930

Kitchener-Waterloo Hospital
Kitchener

Proposal for the Development of Psychometric
Characteristics of the DISC (Developmental Inventory
Scale for Children) 21 296

Provincial Court (Family Division) Conciliation
Project - Toronto

Provincial Court (Family Division) Conciliation Project \$53 160

Toronto Child Parent Development Centre
Toronto

Publication of Final Report (Children's Storefront) 4 640

Durham Region Child Abuse Committee
Oshawa

Project C.A.S.E.D. 19 401

Family Service Association of Metropolitan Toronto
Toronto

Marital Separation Counselling and the Uncoupling Process 62 671

McMaster University - Department of Psychiatry
Hamilton

Canadian Resource Centre for Programme Evaluation Materials 6 235

The Religious Hospitallers of St. Joseph of the Hotel
Dieu of Kingston - Kingston

Primary Care Counselling Project (P.C.C.P.) 101 900

Ottawa Rape Crisis Centre - Ottawa

Ottawa Rape Crisis Centre 27 970

QUEBEC

Unité de recherche socio-psychiatrique, CPC
Centre hospitalier Douglas - Montréal

Recherche sur un mode d'intervention de réseau bio-psycho-social: Le Happening Thérapeutique 53 708

Concordia University - Centre for Human Relations
and Community Studies - Montreal

A Study of Systems Improvement Research in the Administration, Service Delivery and Policy Planning of Four Community Serving Organizations 8 691

Groupe de Recherche sur l'Inadaptation Juvénile
Montréal

Evaluation de Boscoville \$19 508

Corporation Foyer de Mariebourg
Montreal

Centre Mariebourg 32 000

Fédération des Femmes du Québec
Montréal

Service d'Entraide des Veuves du Québec 27 138

Groupe de Ressources techniques en habitation
de Montréal Inc. - Montreal

Groupe de Ressources techniques en habitation
de Montréal Inc. 109 127

Comité d'action et de coordination du Projet
Contact (CAC)
Les Escoumins, Co Charlevoix

Projet Contact 126 300

Laboratoire de Gerontologie sociale
Université Laval - Québec

Demande de subvention de développement 102 470

Centre d'aide aux victimes de viol de
l'Outaouais - Hull

Centre d'aide aux victimes de viol de l'Outouais 20 877

NEW BRUNSWICK

Management of Independent Living Experiences
Incorporated (M.I.L.E. Inc) - Moncton

The Development and Implementation of a Life Skills
Programme for Developmentally Handicapped Adults in
the Community of Moncton 69 069

Université de Moncton, Maritime school of Social
Work - Moncton

Décentralisation des services de formation
professionnelle en service social aux provinces
maritimes. 28 793

PRINCE EDWARD ISLAND

Occupational Therapy Services Planning Committee
Charlottetown

An Integrated Community Program Using Occupational Therapy \$6 800

Department of Social Services - Charlottetown

Towards Meeting the Needs of Senior Citizens in Prince Edward Island 72 000

NOVA SCOTIA

New Dawn Enterprises Limited - Sydney

New Dawn 70 538

Dalhousie University - Institute of Public Affairs
Halifax

Public Policy Formation and the Marginal Work World in the Atlantic Provinces 4 440

Department of Social Services, Social Research and
Planning - Halifax

Vulnerable Mothers, Vulnerable Children: A Follow-up Study of the Unmarried Mother who Keeps her Child 85 791

Institute of Public Affairs, Dalhousie University
Halifax

Social Policy Research Program - Research Group Development Grant 44 512

Children's Aid Society of Colchester County
Truro

Colchester Human Resource Development Project 26 407

Social Planning Department, City of Halifax
Nova Scotia - Halifax

Human Resources Development Association 105 693

Dalhousie University - Maritime School of Social
Work - Halifax

A Project to Study the Social Services Manpower System in Atlantic Canada 160 000

communiqué

1979-101

November 22, 1979

NEW NATIONAL WELFARE GRANTS

OTTAWA - A \$36,532 grant to assist with the design and development of a research program on the problems of teenage pregnancy has been awarded to the Health Care Research Unit of the University of Western Ontario. It is among 12 new National Welfare Grants announced today by Health and Welfare Minister David Crombie. The grants total \$311,004.

National Welfare Grants are designed to promote improvements and innovation in welfare services by providing financial assistance, consultation, information and advice to welfare agencies for short-term research, demonstration and other project activities.

The Minister also announced the awarding of a \$15,200 Senior Welfare Research Fellowship to study treatment centres for handicapped children.

Attached is a list of the approved grants.

- 30 -

Ref.: A1 Hand

Tel.: (613) 995-8465



NATIONAL WELFARE GRANTS

NEW PROJECTS

NATIONAL PROJECT

National Association of Sexual Assault Centres - Hamilton

\$45 524

The project will seek to establish a National Association of Sexual Assault Centres in Canada. Its activities will include the dissemination of a newsletter; the maintenance of a clearing house function to ensure that Centres have access to all available materials of concern to them; the sharing of information and selection of the best material for regional and local adaptation; and, exchange on different methods of operation of rape crisis centres.

YUKON

Yukon Wilderness Program Group - Whitehorse \$10 000

The project will develop and test an alternative treatment program for juveniles in care, in the correctional system or in likelihood of being there, that utilizes the wilderness setting, community and family resources.

BRITISH COLUMBIA

School of Social Work - University of British Columbia
Vancouver \$ 7 000

The project will (i) gather relevant materials and case studies concerning the four Canadian ethnic groups and develop a work book or text for practitioners and students in social work; (ii) develop the text in a manner that it will also be relevant to other helping professions, such as child care staff, human justice professionals, public health and psychiatric nursing etc, and (iii) stimulate further research efforts along similar lines.

ALBERTA

Calgary Board of Education - Continuing Education Department
Calgary \$10 375

The purpose of this project is to evaluate the success rates of the contemporary woman approach to delivering social services to single parents on public assistance.

ONTARIO

Opportunity for Advancement - Toronto \$38 525

The Opportunity for Advancement Training Program will assist other social service delivery personnel to learn the O.F.A. model, to adapt it to make it more appropriate for their consumers and to establish O.F.A. modelled programs within their own agencies.

Health Care Research Unit, University of Western
Ontario - London \$36 532

The purpose of this project is to assist with the design and development of a research program concerned with the problems of teenage pregnancy.

Department of Psychiatry - McMaster University
Hamilton \$29 865

The project will investigate the problem solving activities of workers in selected industrial settings, focusing on the coping strategies - help seeking behaviours - engaged in by workers in their attempts to find solutions to or relief from personal problems disrupting their lives.

Social Planning Council of Metropolitan Toronto
Toronto \$12 625

The purpose of this project is to improve the replicability of Budget Guides developed by the Social Planning Council and to also document in greater detail the methodology underlying the Budget Guides.

Social Planning Council of Metropolitan Toronto
Toronto

\$ 7 600

This project will assist with the cost of consolidating three research reports into a single volume for the purpose of having it published.

The Child in the City Programme - University
of Toronto - Toronto

\$60 771

The project will assess the daily lives of families with varying structures, employment patterns and use of child care facilities to see the effects of various constraints on children and their contact with others, as well as the mitigating effects of a variety of common child care practices.

Home Intervention Team, Department of Psychiatry,
St. Joseph's Hospital - Hamilton

\$10 951

The project will provide a 24 hour service to the police by making trained personnel available to respond to calls from police officers attending domestic disturbance calls. The staff will work with families in order to reach a short-term solution at the time of crisis and a referral to the appropriate social agency of long term service is indicated and followed through.

QUEBEC

School of Social Work - McGill University
Montreal

\$41 236

The purpose of this project is to study the behaviour of workers at their places of employment and to identify the relationship between the characteristics of the employing organizations and the observed patterns of seeking and giving help.

SENIOR WELFARE RESEARCH FELLOWSHIP

James W. Briggs - Alberta

\$15 200

The purpose of this fellowship is to undertake a comparative study of a selected group of treatment centres for handicapped children in order to identify their organization, operation and basic characteristics.

communiqué

1979-102
November 26, 1979

HEALTH AND WELFARE CANADA
PROMOTES BREAST-FEEDING

OTTAWA - National Health and Welfare Minister David Crombie today released an information kit designed to assist health professionals in the promotion of breast-feeding.

Mr. Crombie underlined that it is the view of his department that breast-feeding gives the infant the best possible foundation for future health. However, there is concern that too few mothers choose to breast-feed and that those who do may not continue long enough to give the full benefits to both mother and child.

The information kit released today has been produced in active collaboration with the Canadian Paediatric Society and contains scientific articles on the uniqueness of human milk and the practical management of breast-feeding, lists of resource persons, as well as an attractive poster.

The Minister said he hopes that health professionals will take this opportunity to work together with government agencies, professional groups and lay groups, such as the La Leche League, to promote breast-feeding. Such a promotion of breast-feeding has its origins in a position paper produced by the Canadian Paediatric Society in 1978. This position has been endorsed by the eight professional societies which constitute the Canadian Science Committee on Food and Nutrition, as well as by the American Academy of Pediatrics and the



- 2 -

American Medical Association.

The promotional program launched today by Mr. Crombie complements the work of provincial health departments which have placed an increasing emphasis on breast-feeding in recent years. It has already received, earlier this year, the unanimous support of the Federal-Provincial Advisory Committee on Community Health Services.

- 30 -

NOTE : 1. Information Kit available to the media on request.

Ref. : N-René Mercier

Tel. : (613) 995-8465

communiqué

1980 - 4
January 10, 1980

NATIONAL WELFARE GRANTS

OTTAWA - A \$26,406 grant for a project offering shelter, counselling and referral to Indian women in need has been awarded to the Yukon Indian Women's Association. It is among 19 National Welfare Grants announced today by the Office of Health and Welfare Minister David Crombie. The grants total \$347,659.

The grants cover a wide range of demonstration and research projects and other activities in the social welfare field.

National Welfare Grants are designed to promote improvements and innovation in welfare services by providing financial assistance, consultation, information and advice to welfare agencies for short-term research, demonstration and other project activities.

Attached is a list of the approved grants. •

- 30 -

Ref. : A1 Hand
Tel. : (613) 995-8465



NEWFOUNDLAND

Unified Family Court, St. John's - \$12,578

This project will demonstrate the utility of a specialized social work position within the Unified Family Court of St. John's Newfoundland. Designated the Family Crisis Counsellor this worker will address the particular problems faced by families involved in severe conflict situations including child protection matters. As a result of this project it is expected that useful knowledge will be acquired to assist in dealing with the service issues of family violence and child abuse.

NOVA SCOTIA

Social Planning Department - City of Halifax - Halifax - \$15,056

The purpose of this project is to design a research project which will study the reasons why people leave Municipal Social Assistance rolls in the city of Halifax. While statistics are currently maintained which indicate the monthly rate of turnover, the current state of knowledge as to specific reasons remains very vague.

ONTARIO

Committee for the Development of Canadian Interpreters for the Deaf - Hamilton - \$2500

The purpose of this project is to bring together some eighty interpreters for the deaf from across Canada with a view to creating a National Association of Interpreters for the Deaf which will serve to ensure that an adequate supply of qualified Canadian interpreters will be available for legal, medical and social services as well as agencies and associations of the deaf throughout the country.

Social Planning Council of Ottawa-Carleton - Ottawa - \$18,336

This project will assist the Council to complete a series of community needs profiles and undertake a rating process. This represents a simplified adaptation of "List of Goals and Needs" (LOGAN) which was first developed by the Vancouver United Way.

The Children's Aid Society of Ottawa-Carleton - Ottawa - \$40,000

The project will test the results of offering an after school, day treatment program to adolescents where the only other alternative is the youth's admission to care. The number of adolescent admissions has been rising steadily over the last decade. Not only does this place stress on the Society's residential facilities as well as the agency, but it is also felt that residential care is often not the best resolution to this type of case. The project will, therefore, test the results of the program on both the number of admissions to care and the number of successful case resolutions.

Family Education Centre of the Niagara Region - Niagara Falls - \$35,000

The purpose of this project is to test a model of family support services in a community setting. In addition to being available to the general public, the project will also concentrate on special target groups i.e. abusive parents, single parents and young mothers.

Social Planning and Research Council of Hamilton and District -
Hamilton - \$18,015

This project will begin developing a working base by constructing statistical models which will relate housing, economic and social variables to social service utilization.

University of Guelph - Guelph - \$3,911

This project will investigate factors which directly affect parents' choice of a full-time child care arrangement for children 3 to 5 years of age. Two types of variables will be studied: a) variables likely to affect parents' preferences for, and perceptions of different types of child care (background variables such as demographic factors, child-rearing practices, attitudes towards group care and personal criteria and b) characteristics of the search process parents utilize when seeking a child care arrangement. Parents' satisfaction with current arrangements will also be assessed.

ALBERTA

Alberta Council on Aging - Edmonton - \$36,349

This project will demonstrate the community development technique of "participatory research" among senior citizens in three Alberta communities. This will include one urban area, one small town and one village and surrounding rural involvement.

YUKON

Yukon Indian Women's Association - Yukon - \$26,406

The project will offer basic transition house services (shelter, counselling and referral), to clients in need. In addition, it will develop and co-ordinate supplementary services (education, training, legal services), with related agencies. The project will also explore workable ways of offering outreach services in two aspects by ensuring that appropriate services are also available to women who do not need emergency shelter and that basic services to this target group are, likewise, available throughout the territory including outlying settlements.

QUEBEC

Ecole de Service Social de l'Université de Montréal - Montreal -
\$46,032

The research group on network intervention, while based in the School of Social Work at the University of Montreal, is composed of individuals from the University of Montreal, the University of Quebec at Montreal, as well as several welfare agencies.

The group stresses a particular area of research namely the social network of the client. The research program will focus on three aspects of this network: the primary network, the secondary institutionalized network and the secondary informal network.

Centraide Montreal - Montreal - \$7,926

This design contribution is aimed at conducting basic research to develop a theoretical and methodological framework to promote exchanges and joint ventures between the public and the private sector agencies. One area of major concern is the domain of new services to high-priority groups such as the aged and handicapped, etc.

Ville Marie Social Service Centre - Montreal - \$5,710

This design contribution will allow this public sector agency to carefully plan an outreach intervention, aimed solely at preventing child abuse and neglect, by the use of a program of parent enrichment. The latter will save potential child abuse parents to help them increase their parenting skills and develop a neighbourhood of self-help networks.

NATIONAL PROJECTS

Canadian Association of Schools of Social Work - Ottawa - \$5,090

This is an extension of a previous funded project entitled "The Design of Social Experiments". The project will extend the application of likelihood inference to classes of problems not dealt with in the original project. These problem areas will include bivariate and multivariate regression, time series problems and panel and cohort studies.

Canadian Co-ordinating Council on Deafness - Ottawa \$15,650

The purpose of this project is to provide education programs aimed (i) at the general public to encourage awareness of the problems of deafness, and to discourage prejudice and discrimination against the hearing impaired, (ii) professionals dealing with the deaf. especially in the field of health, legal and social services, to educate them in proper means of communication with the hearing impaired and, thus, encourage effective delivery of services to the deaf and hard of hearing; and, (iii) hearing impaired individuals and groups to inform them of special resources available to them and to educate them in the availability and use of community and government services.

Canadian Association of Schools of Social Work - Ottawa - \$38,500

The purposes of this project are: to identify and examine issues in the planning and implementation of adequate field preparation

programs; to consolidate the results of a variety of experiments recently conducted; to facilitate the development of improved exchange, co-ordination and integration between education and practice; to arrive at a common understanding of the role and place of field instruction in the preparation of Social Work Manpower; to pave the way for formulation of national policy guidelines which would be applicable to national accreditation procedures; and, to provide baseline data for further research.

Canadian Council on Social Development - Ottawa - \$5,000

This project will share the information on the "state of art" within preventive social programs across Canada; the presentation of key operative models, including legislation and policies; analysis of research, evaluation, cost-benefit and political issues relating to preventive programs; and, the exploration of priority setting issues and their relationship to the development of frameworks for re-orienting social policy.

Coalition of Provincial Organizations of the Handicapped - Winnipeg - \$5,600

This project will serve to bring eight handicapped persons from different parts of Canada, in order to prepare a brief for a hearing with the Canadian Transport Commission.

Coalition of Provincial Organizations of the Handicapped Inc. - Winnipeg - \$10,000

The purpose of this project is to initiate a cross-country dialogue by means of a national committee process, of three months duration leading up to the Open National Transportation Conference. A key area of discussion will be the parameters of rehabilitation.

CAI
HW
-NSC

Communiqué

January 17, 1980
1980-5

MORE MONEY FOR MEDICAL RESEARCH

OTTAWA - The Honourable David Crombie announced today a 17.3 percent increase in the Medical Research Council (MRC) budget for 1980-81, bringing the total to \$82.2 million.

This represents \$11.9 million in additional funding for MRC extramural programs over the 1979-80 budget. Speaking on behalf of the Cabinet which approved the recommendation, Mr. Crombie said the decision reflects approval of the first year of MRC's proposed 5-year plan.

"Approval of this proposal illustrates the commitment and recognition by this government of the importance of the medical research community," said Mr. Crombie.

Dr. René Simard, President of the Council, expressed satisfaction at the news. "This will enable Council to provide support to highly rated investigators as recommended by its expert-review panels, and to fund a substantial number of new entrants to the grants program. It also means that there will be funds for some badly needed research equipment and some possibility of funding additional research in areas of national concern, which would not have been



possible in the coming year on the basis of financing according to the formula adopted earlier for MRC."

The Medical Research Council is one of the three granting councils with major responsibilities for the federal support of basic and applied research carried out in Canadian universities and their affiliated institutions.

MRC's 5-year plan recognizes the need for a strong federal presence in the field of medical research, but also takes into account the significant contributions to this area by the many voluntary disease-oriented agencies which support research in Canada, the contributions made by many of the provinces, and by the universities themselves.

"Our 5-year plan permits better utilization of existing research capacity," said Dr. Simard; "it provides for modest increases which, even in times of restraint, must be made to maintain a viable national effort. We look forward now to acceptance of the balance of our proposal so that Council can plan ahead for the years to come."

Ref.: J.M. Roxburgh

Tel.: (613) 996-8172



news release

1980-24
April 2, 1980

WORLD HEALTH ORGANIZATION FELLOWSHIPS

OTTAWA - The Department of National Health and Welfare, on behalf of the World Health Organization (WHO), today announced the annual competition for fellowships for Canadian citizens wishing to study abroad for two or three months.

All Canadians working as professionals in health care delivery or health education are eligible to apply for these WHO fellowships, with the exception of those engaged in pure research, undergraduate and graduate university students and persons over 55 years of age.

Applicants will be rated by a selection committee on the basis of education, experience, field of activity, proposed area of study and the intended use of their newly-acquired knowledge. Responsibility for final selection of fellowship recipients will rest with the WHO.

Applicants should submit their applications before August 15, 1980. Application forms can be obtained by writing to:

WHO Fellowships
Intergovernmental and International Affairs Branch
Department of National Health and Welfare
Brooke Claxton Building, Tunney's pasture
Ottawa, Ontario
K1A 0K9

- 30 -

Ref. : A1 Hand
Tel. : (613) 995-8465



Health
and Welfare
Canada

Santé et
Bien-être social
Canada

NEWS RELEASE



1980 - 37
May 15, 1980

FOOD ADDITIVE SURVEY RESULTS RELEASED

OTTAWA - "The vast majority of Canadians fear that commonly used food additives represent a health hazard, despite scientific evidence to the contrary," Health and Welfare Minister Monique Bégin said today.

The Minister was commenting on the newly-released results of a national survey on food additives conducted last summer by the department's Health Protection Branch. "The message we received was that Canadians need and want to know more about the use and control of additives," she noted.

Almost 25,000 Canadians completed questionnaires asking their views on the definition, use, value and control of food additives. Most people are confused about what food additives are and to what degree they are permitted in foods, the findings show; 91 per cent of the respondents said they need to know more.

.../2

Although the majority of those surveyed know that government regulations restricting the use of additives do exist, it appears that the respondents have a limited understanding of the extent of government control. "Manufacturers' use of additives is constantly monitored by my department," Miss Bégin said, "and all proposals for new uses must undergo thorough scientific review for potential health hazards before being allowed on the market. I intend to ensure that Canadians are made more aware of the tight control the federal government maintains over the quality of their food supplies."

The survey also disclosed that 70 per cent of Canadians feel additives do not improve the quality of food and 60 per cent say they would pay more for additive-free food. The media, rather than health professionals, were cited as the most common source of information on additives.

The department will consider the findings when reviewing food policy and when revising public education programs. This year, food additive workshops are being conducted for health professionals, and information booths will be set up in shopping malls in five regions of the country.

The findings are also being discussed with other government agencies, food manufacturers, health professionals, and consumer organizations. Representatives of the food industry, after reviewing the survey results, have agreed to

- 3 -

work towards better public understanding of the necessity for food additives in modern food processing. Through joint action it is hoped that communication with consumers can be improved in order to alleviate their expressed concerns.

Details of the survey's objectives, methodology, and results are attached.

- 30 -

Ref.: Jean Sattar

Tel.: (613) 996-0446

NEWS RELEASE



1980-53

July 7, 1980

NATIONAL WELFARE GRANTS RENEWED

OTTAWA - Health and Welfare Minister Monique Bégin announced today that 47 National Welfare Grants, totalling \$2 458 540 have been renewed for another year.

The grants cover a wide range of demonstration and research projects and other activities in the social welfare field.

National Welfare Grants are designed to promote improvements and innovation in welfare services by providing financial assistance, consultation, information and advice to welfare agencies for short-term research, demonstration and other project activities.

Attached is a list of the approved grants.

- 30 -

Ref.: A1 Hand

Tel.: (613) 995-8465

RENEWED PROJECTS FOR 1980-81

NATIONAL ORGANIZATIONS

Canadian Association of Schools of Social
Work-Ottawa

Study of Trends and Issues in the Field
Preparation of Social Work Manpower \$28 760

Canadian Association of Schools of Social
Work-Ottawa

The Design of Social Experiments 5 710

Canadian Association of Sexual Assault
Centre - Windsor

The Design of Social Experiments 71 460

Canadian Co-ordinating Council on
Deafness - Ottawa

Public Education Program 36 434

Canadian Association for the Mentally
Retarded - Downsview

Comprehensive Community Service (Com Serv) 75 000

YUKON TERRITORY

Watson Lake Area Youth Project

Watson Lake Area Productive Youth
Project 23 040

Yukon Women's Transition Home Society
Whitehorse

Women's Transition Home 75 000

NORTHWEST TERRITORIES

Mothers and Tots Drop-In Centre
Yellowknife

Mothers and Tots Drop-In Centre 26 195

BRITISH COLUMBIA

United Way of Greater Vancouver - Vancouver

Research Group Development Grant \$19 868

Prime Time - Victoria

Prime Time - A Project for Women In
Their Middle Years 25 545

Lower Mainland Parent and Child Therapy Society - Vancouver

P.A.C.T. 201 331

Children's Hospital - Vancouver

Counselling and Home Training Program
for Deaf Children and Their Families 107 315

ALBERTA

Alberta Council on Aging - Edmonton

Project Involvement 66 745

Department of Recreation Administration - University of Alberta - Edmonton

An Evaluation of the Goal Effectiveness of
Alberta's Preventive Social Service Program 3 500

The Vocational and Rehabilitation Research Institute-Calgary

An Evaluation of Programs for Several Agencies
Habilitating the Developmentally Handicapped
Young Adult 12 000

Special Programs and Resources for Kids S.P.A.R.K. - Banff

Total Life Program 52 774

MANITOBA

University of Manitoba - School of Social Work - Winnipeg

A Demonstration of the Effect of Social
Work Skills in Industry 125 115

ONTARIO

<u>Health Care Research Unit-University of Western Ontario - London</u>	
Teenage Pregnancy: Antecedents, Outcomes and Interventions	\$22 210
<u>Ashby Rehabilitation Development Consultant Service - Toronto</u>	
Ashby Rehabilitation Centre: Development of Training and Public Education Materials	13 074
<u>Opportunity for Advancement-Weston</u>	
Opportunity for Advancement Training Program	62 450
<u>Department of Family Medicine of Queen's University and Social Work Dept. of Hotel Dieu Hospital - Kingston</u>	
Primary Care Counselling Project	120 775
<u>The Family Education Centre of the Niagara Region - School for Parents - Thorald</u>	
Primary Care Counselling Project	70 000
<u>The Children's Aid Society of Ottawa - Carleton - Ottawa</u>	
Sharing the Parenting	104 820
<u>Social Planning Council of Ottawa - Carleton - Ottawa</u>	
A Project to Rank Community Needs	16 250
<u>Child in the City Programme - University of Toronto - Toronto</u>	
Childcare Under Constraint: Conditions of Daily Life as Influenced by Family Structure, Employment and Children's Services	71 001
<u>Social Planning and Research Council of Hamilton & District - Hamilton</u>	
Geographical Analysis of Community Service Utilization	13 580

Department of Psychiatry, Faculty of
Health Sciences, McMaster University
- Hamilton

Personal Problems, Help-Seeking and
Absenteeism Among Industrial Workers \$18 297

Kitchener-Waterloo Hospital - Child
and Family Centre - Kitchener

Proposal for the Development of
Psychometric Characteristics of the
Developmental Inventory Scale for
Children (D.I.S.C.) 31 502

Social Planning Council of Metropolitan
Toronto - Toronto

Research Group Development Grant 20 427

Social Planning Council of Metropolitan Toronto-Toronto

Project Child Care Supplementary Publication 4 904

Department of Family Studies-University of Guelph-Guelph

Factors Influencing Parents Preferences fo and Use of
Full-Time Child Care Arrangements 7 257

QUEBEC

Centre for Human Relations and Community
Studies - Concordia University - Montreal

A study of Systems Improvement Research
in the Administration, Services Delivery,
and Policy Planning of Four Community
Serving Organizations 4 422

Ecole de Service Social-University de
Montréal - Montréal

"Mécanismes institutionnels et Vécu
professionnel le service social au
Québec" 33 836

Laboratoire de Gerontologie sociale de
l'Université - Laval - Québec

Contribution a des groupes de recherche 94 282

Ecole de service social - Université
de Montréal

Perfectionnement d'un group de recherche
sur les pratiques de réseaux 101 620

Groupe de Ressources Techniques en
Habitation de Montréal Inc. - Montréal

Consolidation du Groupe de Ressources
Techniques en Habitation \$10 000

Comité d'Action et de Coordination -
Les Escoumins

Projet Contact 140 000

Fédération des Femmes du Québec - Montréal

Service d'entraide des Veuves du Québec 25 000

Centre de Psychiatrie Communautaire - Verdun

Recherche sur un mode d'intervention de
réseau bio-psycho-social: le Happening
Thérapeutique 100 000

NEW BRUNSWICK

Management of Independent Living
Experience Incorporated - Moncton

The Development and Implementation
of a Life Skills Program for the
Developmentally Handicapped in the
Community of Moncton 11 516

PRINCE EDWARD ISLAND

Department of Social Services - Charlottetown

Towards Meeting the Needs of Senior Citizens
in Prince Edward Island 27 000

NOVA SCOTIA

New Dawn Enterprises Limited - Sydney

Towards Meeting the Needs of Senior Citizens
in Nova Scotia 45 000

Social Planning Department - City of
Halifax - Halifax

Human Resources Development Association 121 891

Department of Social Services - Policy
Planning & Research - Halifax

Vulnerable Mothers, Vulnerable Children:
A Follow-up Study of the Unmarried
Mother who Keeps her Child \$76 407

Maritime School of Social Work-Dalhousie
University - Halifax

A Project to Study the Social Services
Manpower System in Atlantic Canada 46 950

Institute of Public Affairs-Dalhousie
University - Halifax

Research Group Development Grant 52 309

NEWFOUNDLAND

Unified Family Court - St. John's

Family Crisis Counsellor 56 168

NEWS RELEASE



1980 - 55
July 14, 1980

HEALTH MINISTER BÉGIN INTRODUCES IYDP LOGO

OTTAWA - Health and Welfare Minister Monique Bégin today made public the official logo for the International Year of Disabled Persons in 1981.

The official Canadian logo for IYDP 1981 is based on the original design presented by the French National Commission for IYDP, representing two people holding hands in solidarity and support of each other in a position of equality.

In making the logo public the Minister urged government officials at all levels, organizations and the general public to become involved in activities for, and in support of, the Year. She encouraged use of the logo whenever possible to help publicize the theme of the Year, "Full Participation and Equality".

The main objectives of the International Year of Disabled Persons are to promote the integration of the

disabled into the community and the prevention of disabling conditions.

Information concerning the official logo, a reproduction of it and details pertaining to its use are attached.

Persons wishing to obtain information about plans for the International Year of Disabled Persons should write:

IYDP
P.O. Box 1981
Postal Station C
Ottawa, Ontario
K1Y 4N9

Ref.: David Polowin

Tel.: (613) 995-8465

International Year
of Disabled Persons



Année internationale
des personnes handicapées

THE UNITED NATIONS GENERAL ASSEMBLY HAS PROCLAIMED 1981 AS THE INTERNATIONAL YEAR OF DISABLED PERSONS. THE THEME FOR THE YEAR IS "FULL PARTICIPATION AND EQUALITY". THE YEAR WILL PROMOTE THE ENJOYMENT BY DISABLED PERSONS OF RIGHTS AND OPPORTUNITIES WHICH ARE AVAILABLE TO OTHER PERSONS IN SOCIETY.

THE OFFICIAL LOGO ADOPTED BY THE UNITED NATIONS TO BE USED IN CONNECTION WITH THE INTERNATIONAL YEAR OF DISABLED PERSONS (IYDP) REPRESENTS TWO PEOPLE HOLDING HANDS IN SOLIDARITY AND SUPPORT OF EACH OTHER IN A POSITION OF EQUALITY.

IT IS BASED ON AN ORIGINAL DESIGN PRESENTED BY THE FRENCH NATIONAL COMMISSION FOR IYDP. IT REFLECTS EQUALITY, HOPE AND SUPPORT. THE LEAVES AROUND THE LOGO SHOW A PART OF THE UNITED NATIONS EMBLEM.

The official IYDP logo and its use

Responsibility for the Logo

The logo belongs to the United Nations. Responsibility for its proper use has been entrusted to the Government of Canada and to the Canadian Organizing Committee for the IYDP. Pending development of final guidelines, the following guidelines are provided to ensure the widest possible use of the logo while also ensuring its protection from abuse and distortion.

The use of the logo is examined in three separate contexts: (1) for purely informational purposes; (2) for fund-raising by non-profit organizations; and (3) for commercial purposes.

Informational Purposes

The logo is available without cost to anyone committed to the objectives, goals and purposes of the International Year of Disabled Persons and intending to use the logo only for informational purposes.

Fund-Raising Purpose by Non-profit Organizations

Those who wish to use the official logo for fund raising purposes excluding commercial ventures, must obtain written permission from the address shown below.

When requesting permission, please provide the information about your organization's general activities, the purpose for which you propose to use the emblem, the way in which you propose to use the emblem and the purposes for which the funds raised are to be used.

Commercial Purposes

"Commercial Purposes" includes all instances in which the emblem is either itself offered for sale or incorporated into an item or service which is offered for sale. No commercial use as defined above will be permitted without express approval from the address shown below.

A camera - ready copy of the logo as well as the IYDP decals may be obtained from:

P.O. Box 1981
Station "C"
Ottawa,
Ontario,
K1Y 4N9

Please print your name and address and state where you wish to use the IYDP logo.

NEWS RELEASE

Government of Canada

CA
11/11/80
11/11/80



1980-78
September 29, 1980

NATIONAL WELFARE GRANTS

OTTAWA - A \$80,847 grant for a project to assist Nova Scotia Métis and non-status Indians in achieving improved access to social services has been awarded to the Native Council of Nova Scotia. It is among 15 National Welfare Grants announced today by Health and Welfare Minister Monique Bégin. The grants total \$501,512.

DEPOSITORY LIBRARY MATERIAL

The grants cover a wide range of demonstration and research projects and other activities in the social welfare field.

National Welfare Grants are designed to promote improvements and innovation in welfare services by providing financial assistance, consultation, information and advice to welfare agencies for short-term research, demonstration and other project activities.

Attached is a list of the approved grants.

- 30 -

Ref.: A1 Hand

Tel.: (613) 995-8465

NEWFOUNDLAND

The Community Services Council - St. John's - \$60,029

The purpose of this project is to add research personnel to the existing research staff of the Community Services Council of St. John's in order to: enhance the capacity of the Council's Research Unit; allow more consultation and feedback; raise the public consciousness concerning social development by giving profile to many issues; and to extend the Council's research capacity beyond the St. John's area.

NOVA SCOTIA

Native Council of Nova Scotia - Truro - \$80,847

The project will demonstrate the impact of the use of native para-professionals in the role of social welfare counsellors, working under native leadership, but in co-operation with the established social service network. Through the intervention, guidance and referrals of the Native Social Counsellor, the project will assist the Métis and non-status Indians of Nova Scotia to attain a better quality of life for themselves by assisting them in achieving improved access to social services. The majority of the work will be with mother-led families.

ONTARIO

Ontario Association of Family Service Agencies and University of Toronto - Toronto - \$69,760

The project will demonstrate and test an approach for establishing research interests, resources and priorities among staff of Family Service Agencies, develop motivation and support for research at the agency level; and develop those attitudes and skills in board and staff that are the prerequisite to the development and conduct of research by individual agencies.

University of Waterloo - Waterloo - \$18,755

The purpose of this project is to design a study to investigate the factors affecting the choices of accommodation by senior citizens in the Waterloo Region. The design phase will involve the development of sampling techniques appropriate for replication studies in other areas, and the development and testing of a questionnaire. The population to be studied is the male and female population of the Region over the age of 55.

Social Planning Council of Metropolitan Toronto - Toronto - \$4,960

The purpose of this project is to undertake preliminary research of available literature concerning the effects of temporary layoffs and recurring unemployment, in order to prepare a strategy for a future study.

QUEBEC

Ville Marie Social Service Centre - Montreal - \$40,786

This project is designed to respond to the needs of young families, in order to help them develop some new skills which will make the task of raising children easier and more rewarding. This outreach program will use trained lay workers under professional supervision in an attempt to raise the level of parenting skills and link families up with the community in which they live.

Bureau de Consultation Jeunesse Inc. - Montreal - \$8,500

This development grant will allow the volunteer organization to attain a two-fold objective: first to complete its research in the area of practices encouraging an individualized approach to young people (15 to 20 years old) in difficulty and second to encourage their integration into the life of their community.

Commission d'étude sur le chien-guide - Rosemere - \$4,500

This project will allow completion of two studies related to the possibility of setting up a professional-calibre guide dog training centre in Canada. The first phase of the project is a study of the market per se and the second concerns the general organization and financing of the training school.

SASKATCHEWAN

Department of Extension - University of Regina - Regina - \$9,440

This project is an exploratory study which will examine a range of psycho-social variables among a group of teenage mothers under 16 and their children, over a twelve-month period. The variables will include the psychological maturation of teenage parents, the phenomenological experience of pregnancy, the interaction between mother and child over twelve months, and the mothering capabilities of the members of the group.

YUKON

Yukon Wilderness Alternatives Society -
Whitehorse - \$66,385

The project will establish, implement and test a community based alternative program for children and young adults, (through a community committee structure and the integration of wilderness, agency, and community resources). It will shift the emphasis in the care, education and rehabilitation of children and young adults from the centralized institutional services to local community based care, control and responsibility.

BRITISH COLUMBIA

University of Victoria - School of Social Work -
Victoria - \$62,260

The purpose of this project is to examine the development of social policy and social services in British Columbia during the past decade using the Community Resources Act of 1974 as a focal point, to assess the experience of two service structures, Community Resource Boards and Health and Human Resource Centres for providing health and social services, and to determine if new structures for providing health and social services can be constructed.

NATIONAL PROJECTS

Canadian Association of Social Workers - Ottawa - \$20,000

This project will collect, review and compile existing information on regulating social work practice, demonstrate its strengths and weaknesses for the social work profession and arrive at comparable standards for public or client protection across Canada.

Canadian Association for Children With Learning Disabilities -
Ottawa - \$35,290

The purpose of this project is to develop resource materials and to help establish a Resource Centre at the National Headquarters.

Canadian Foster Parent Association - Toronto - \$10,000

The project will assist the Canadian Foster Parent Association to organize a symposium, to be held in Ottawa, from October 31 to November 2, 1980, which will provide a forum for representative foster parents from across Canada to meet and share information related to ongoing development in the area of foster care.

Canadian Organizing Committee - Montreal - \$10,000

"IXth International Conference of Social Gerontology". This conference was held in Quebec City, August 27, 28 and 29, 1980. It brought together a broad spectrum of professionals and scientists in the fields of research, education, health and social services. A wide variety of scientific papers was presented around the theme "Adaptability and Aging."

NEWS RELEASE

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1980-90
November 10, 1980

MORTALITY ATLAS RELEASED

OTTAWA - Health and Welfare Minister Monique Bégin and Supply and Services Minister Jean-Jacques Blais today announced the publication of the Mortality Atlas of Canada Volume 2: General Mortality, published jointly by Health and Welfare Canada and Statistics Canada.

Production of the atlas was undertaken as part of Health and Welfare's program for national surveillance of non-communicable diseases. Census and mortality data supplied by Statistics Canada were used to produce grid maps illustrating causes of death across the country between 1966 and 1976. The first volume, released in May this year, revealed striking regional differences in mortality rates due to various types of cancer.

The new volume contains 34 colour maps which illustrate the distribution of major diseases or conditions in Canada including ischemic heart disease, stroke, diabetes, car accidents, suicide and special maps for congenital anomalies and infant mortality. General mortality rates were high in

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the Northwest Territories, parts of Manitoba, northern Ontario, and parts of Quebec, New Brunswick and Nova Scotia. Northern Saskatchewan and Manitoba experienced high mortality due to respiratory disease, fire, and (for males) drowning and homicide. In northern Ontario, high mortality rates were linked to ischemic heart disease, accidents and violence. General mortality rates were low in southern Saskatchewan and several regions in Alberta, British Columbia and Newfoundland.

There is insufficient knowledge at present to attribute mortality differentials revealed in the atlas to specific causes. In fact, the purpose of the atlas is to stimulate health studies to develop knowledge which could lead to control measures to reduce the current burden of premature mortality. It is hoped that the atlas will also contribute to health education, long-term health planning and the collection of essential health data.

Copies of the atlas, catalogue no. H49-6/2-1980, are available at \$18.25 each from the Canadian Government Publishing Centre, Hull, Quebec or authorized bookstore agents.

Ref.: Jean Sattar

Tel.: (613) 996-0446

